



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 9/30/19	Permit No: 3209 4088
Date Issued:	By: crew
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 12150 SW Chesline rd
City/State/ZIP: Beaverton	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Instal new 200A panel and 4 circuits	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Salan Electric LLC	
Address: 19645 SE Wooded Hills dr	
City/State/ZIP: Danvers OR 97089	
Phone: 503-351-3730	Fax:
E-mail:	CCB lic. no.: 160288
Electrical lic. no.: C182	City or metro lic.:
Supervising electrician signature, required: [Signature]	
Print name: DRAGOS SALAR	Date: 9.30.2019
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	(1)	115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit	(4)	4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			\$0.00	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.

Form 870-1002

REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222

BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 9-27-19	Permit No.: 32019-4068
Date Issued: 9-27-19	By: HW
Payment Type: Visa	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 8625 SW Cascade
City/State/ZIP:	
Suite/bldg./apt. no.: 500 & 506	Project name: Arition T.I
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Branch circuits for T.I.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: R.C. Costello Electrical Contr. Inc	
Address: P.O. Box 336	
City/State/ZIP: Astoria OR 97002	
Phone: 503-504-6758	Fax:
E-mail: rccostelloelec@aol.com	CCB lic. no.: 87402
Electrical lic. no.: 3-344C	City or metro lic.: 4170
Supervising electrician signature, required: _____	
Print name: Roger C Costello	Date: 9/26/19
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Floating buildings		
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks	<input type="checkbox"/> Commercial-use agricultural buildings		
		<input type="checkbox"/> Installation of 150 KVA or larger separately derived system		
		<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14	81.14	2
Each add'l branch circuit	10	4.26	42.60	
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			123.74	0.00
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			14.85	0.00
TOTAL PERMIT FEE			138.59	0.00

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* Number of inspections allowed per permit.
Form B70-1002

REV 10/17



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Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received:	Permit No.:
Date Issued: 8/27/2019 9-26-19	By: B2019-3641
CITY OF BEAVERTON	Payment Type: <i>Mike</i>

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 12130 SW 173rd Terrace
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: 175TH AVE AND SW BARROWS RD	
Subdivision: SOUTH COOPER MT	Lot no.: 174
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW CONSTRUCTION	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: SK HOFF CONSTRUCTION	
Address: 735 SW 158TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Phone: (503) 641-7342	Fax: (503) 641-7661
E-mail: sguerrero@arborhomes.com	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: 01/29/19	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: SK HOFF CONSTRUCTION	
Contact name: SANDRO GUERRERO	
Address: 735 SW 158TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Phone: (503) 319-6963	Fax: (503) 641-7661
E-mail: sguerrero@arborhomes.com	
CONTRACTOR	
Business name: Garner Electric	
Address: 2920 SE BROOKWOOD AVE STE A	
City/State/ZIP: HILLSBORO, OR 97123	
Phone: (503) 648-4552	Fax:
E-mail: melgarner@garnerelectric.com	CCB lic. no.: 121159
Electrical lic. no.: 34-305C	City or metro lic.: 4410
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: Chuck Garner	Date: 01/29/19
Authorized signature: <i>[Signature]</i>	
Print name: Melissa Stock	Date: 01/29/19

BUILDING DIVISION PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less	1	194.64		4
Ea. add'l 500 sq. ft. or portion	6	34.77		
Limited energy, residential (with above sq. ft.)	1	46.42	46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	115.83	115.83	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			162.25	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			19.47	
TOTAL PERMIT FEE			\$181.72	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.

Form B70-1002

REV 10/17



Renewable Electrical Energy Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 9-25-19 Permit No.: B2019-4023
Date Issued: 9-25-19 By: MK
Payment Type: MC

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: Solar PV	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 11590 SW BUTTE LN
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: Vose	Lot no.: T1S R1W S22
Tax map/parcel no.: 1S122CA13000	
DESCRIPTION OF WORK	
Residential Rooftop Solar PV 6.62 kW	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
CONTRACTOR	
Business name: Blue Raven Solar, LLC	
Address: 1403 North Research Way	
City/State/ZIP: Orem, UT 84097	
Phone: 385-482-0045	Fax:
E-mail: permitting.department@blueravensolar.com	CCB lic. no.: 210112
Electrical lic. no.: c1214	City or metro lic.: 5869S
Supervising electrician signature, required: Samuel Collier	
Print name: Samuel Collier	Date: 09/23/2019
Authorized signature: Jeffrey Lee	
Print name: Jeff Lee	Date: 09/23/2019

FEE SCHEDULE			
Number of inspections per item () Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)		81.14	
5.01 to 15 kva (2)	1	115.83	
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) (OAR 918-309-0070)		81.14	
FEE TOTALS			Recalculate
Subtotal			0.00
<< Check box if plan review is required			
Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$129.73

This permit application expires if a permit is not obtained within
180 days after it has been accepted as complete

Form B70-1005

REV 10/17

ELECTRONIC SUBMITTAL

SEE 1/BLDG DEV W@ 8

Beaverton
OREGON

Application
City of Beaverton Community Development
PO Box 4755, Beaverton, OR 97076
Phone: (503) 526-2403; Fax: (503) 526-2550
Internet address: www.BeavertonOregon.gov

RECEIVED

OFFICE USE ONLY

Date Received: 06/04/2019	Permit No.: B2019-2391
Date Issued: 9-25-17	By: <i>the</i>
CITY OF BEAVERTON BUILDING DIVISION	Payment Type: <i>VISA</i>

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 11350 SW Canyon Rd,
City/State/ZIP: Beaverton OR 97005	
Suite/bldg./apt. no.:	Project name: Beaverton Mixed Use
Cross street/directions to job site: SW Canyon and On Ramp to 217	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Install 1200A Service, 5 meters for 4 future tenants and House panel. Shell work only. Wire HVAC and Shell lighting. Wire elevator and install panels for future tenants.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Edge Development	
Contact name: Dave Didier	
Address:	
City/State/ZIP:	
Phone: 503-841-5923	Fax:
E-mail:	
CONTRACTOR	
Business name: Sunlight Electric Inc	
Address: 2804 NE 65th Ave Suite D	
City/State/ZIP: Vancouver WA 98661	
Phone: 971-222-5758	Fax: 360-326-9660
E-mail: sunlight.inc1@comcast.net	CCB lic. no.: 172549
Electrical lic. no.: C230	City or metro lic.: 11608
Supervising electrician signature, required: <i>Chester Garrett</i> 1793S	
Print name: Chester Garrett	Date: 06/03/19
Authorized signature: <i>Peter Kozarez</i>	
Print name: Peter Kozarez	Date: 06/03/19

PLAN REVIEW				
Please check all that apply:		<input checked="" type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Recreational vehicle parks			
<input type="checkbox"/> Six or more residential units				
<input type="checkbox"/> Health-care facilities				
<input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		144.20		4
Ea. add'l 500 sq. ft. or portion		25.75		
Limited energy, residential (with above sq. ft.)		34.40		2
Limited energy, multi-family residential (with above sq. ft.)		67.95		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	7	85.80		2
201 amps to 400 amps		102.15		2
401 amps to 600 amps		169.90		2
601 amps to 1,000 amps		222.20		2
Over 1,000 amps or volts	1	511.35	511.35	2
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		67.95		2
201 amps to 400 amps		94.40		2
401 amps to 600 amps		136.40		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit	18	3.15	56.70	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		60.10		2
Each add'l branch circuit		3.15		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		67.95		2
Utility reconnect		67.95		1
Pump or irrigation circle		67.95		2
Sign or outline lighting		67.95		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		67.95		2
Each additional inspection over allowable in any of the above				
Per inspection		60.10		
Investigation fee				
Other:				
ELECTRICAL PERMIT FEES				
Subtotal		0.00	568.05	
Plan review (25% of permit fee)			142.01	
State surcharge (12% of permit fee)		0.00	68.17	
TOTAL PERMIT FEE		0.00	778.23	

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Electrical Permit Application

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Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222

BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 9-25-19	Permit No.: 82019-4027
Date Issued: 9-25-19	By: MK
Payment Type: Visa	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 5870 SW 152nd Ave
City/State/ZIP: Beaverton OR 97007	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Electrical reconnect	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Michael Rohde	
Address: 18287 SW Florenda Ln	
City/State/ZIP: Beaverton OR 97007	
Phone: 503-866-7311	Fax:
E-mail: oldmanpk@hotmail.com	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: [Signature]	Date: 9/25/19
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect	1	91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			4102.73	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.

Form B70-1002

REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222

BeavertonOregon.gov

OFFICE USE ONLY

Date Received:

Permit No.:

Date Issued:

Payment Type:

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 18185 SW Scholls Ferry Rd
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: SW Strobel Rd & SW Silvertip St	
Subdivision: "The Ride" @ South Cooper Mtn.	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Install (59) Street Lights, conduit, wire and Junction boxes.	
Install (1) 200amp or less service and (8) circuits.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Lightworks Electric Company	
Contact name: Ashley Guile	
Address: 20915 SW 105th Ave Suite A	
City/State/ZIP: Tualatin, OR 97062	
Phone: 503-691-2959	Fax: 503-691-2918
E-mail: ashley@lightworkselectric.com	
CONTRACTOR	
Business name: Lightworks Electric Company	
Address: 20915 SW 105th Ave Suite A	
City/State/ZIP: Tualatin, OR 97062	
Phone: 503-691-2959	Fax: 503-691-2918
E-mail: ashley@lightworkselectric.com	CCB lic. no.: 158595
Electrical lic. no.: 34-673C	City or metro llo.:
Supervising electrician signature, required: Ronald Z Poe	
Print name: Ronald Z Poe	Date: _____
Authorized signature: _____	
Print name: Ashley Guile	Date: 9/17/19

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks	
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit	8	4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			\$0.00	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.
Form B70-1002 REV 10/17

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00840**

Approval Code: 06966G 9/25/2019 7:30 am

E-mailed To: crystalr@westsideelectric.com

B2019-4021

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15330 SW SPRINGDALE CT	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: GREG COURT	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S117DC00500	
DESCRIPTION OF WORK	
PANEL CHANGE & EV OUTLET, HOT TUB WIRING LIGHTING & PLUGS AND GARAGE OUTLETS.	
APPLICANT	
Name: CRYSTAL KREGER	
Phone: 5032311548	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-135C	CCB lic. no.: 13306
Business Name: WEST SIDE ELECTRIC COMPANY INC	
Contact:	
Address: 1834 SE 8TH AVE	
City/State/ZIP: PORTLAND, OR 972143532	
Phone: 5032311548	Fax: 5037360677
Email: DICKK@WESTSIDEELECTRIC.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	5	\$4.26	\$21.30
Electrical Permit Fees			
Subtotal			\$137.13
State surcharge (12% of permit total)			\$16.46
TOTAL PERMIT FEE			\$153.59

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Beaverton
OREGON

City Of Beaverton

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00835

Approval Code: 07164G 9/24/2019 7:19 am

E-mailed To: shawn@procomnw.com

B2019-4004

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 9640 SW SUNSHINE CT	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 400	
Project Name: Home Instead	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S123BA01101	
DESCRIPTION OF WORK	
Data	
APPLICANT	
Name: Shawn Giles	
Phone: 5037970000	Fax: 5032338052
Email:	
CONTRACTOR	
Elec lic. no.: CLE282	CCB lic. no.: 194272
Business Name: PROCOM TECHNOLOGIES LLC	
Contact:	
Address: PO BOX 22288	
City/State/ZIP: PORTLAND, OR 97269	
Phone: 5037970000	Fax: 5032338052
Email: brian@procomnw.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**Beaverton****City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00834**

Approval Code: 632202 9/23/2019 6:13 pm

E-mailed To: Andrew@squireselectric.com

B2091-4003

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7960 SW BARNARD DR	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: 7960 SW Barnard Dr	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120CD00700	
DESCRIPTION OF WORK	
kitchen remodel.	
APPLICANT	
Name: Andrew Cohen	
Phone: 5032521609	Fax: 5032535831
Email:	
CONTRACTOR	
Elec lic. no.: 26-1101C	CCB lic. no.: 135085
Business Name: SQUIRES ELECTRIC INC	
Contact:	
Address: 2203 NE MARTIN LUTHER KING JR BLVD	
City/State/ZIP: PORTLAND, OR 97212	
Phone: 5032521609	Fax: 5032535831
Email: office@squireselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$93.92
State surcharge (12% of permit total)			\$11.27
TOTAL PERMIT FEE			\$105.19

Upon review and approval by your local jurisdiction, your permit will be e-mailed, or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Milikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00836**

Approval Code: 536710 9/24/2019 7:47 am

E-mailed To: jensedwardselectric@gmail.com

B2019-4005

TYPE OF WORK☐ New Construction ☒ Addition/alteration/replacement**CATEGORY OF CONSTRUCTION**☒ 1 or 2 family dwelling ☐ Multi-family ☐ Commercial ☐ Accessory**JOB SITE INFORMATION AND LOCATION**

Job Address: 15485 SW CYNTHIA LN

City/State/ZIP: BEAVERTON, OR 97007

Suite/bldg./apt.no.:

Project Name:

Cross Street/directions to job site:

Tax map/parcel no.: 1S120DB08200

DESCRIPTION OF WORK

Bath/living room remodel

APPLICANT

Name: Jens Edwards

Phone: 503-740-7651

Fax: 503-232-0545

Email:

CONTRACTOR

Elec lic. no.: C675

CCB lic. no.: 192045

Business Name: JENS EDWARDS ELECTRIC LLC

Contact:

Address: PO Box 18159

City/State/ZIP: PORTLAND, OR 97218

Phone: 5037407651

Fax: 5032320545

Email: jensedwardselectric@gmail.com

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of Inspections Included in paid services:

Residential Service: 4

Reconnect Only: 1

All Other Services: 2

PLAN REVIEW

Please check all that apply:

☐ A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other☐ Fire pumps☐ Emergency systems☐ Addition of a new motor load of 100 HP or more☐ Six or more residential units in one structure☐ Health care facilities☐ Hazardous locations☐ A service or feeder rated at 600 amps or more☐ Buildings more than three stor☐ Marinas and boat yards☐ Floating buildings☐ Commercial-use agricultural buildings☐ Installation of a 150 KVA or larger seperately derived sys☐ "A", "E", or "I-2" or "I-3"☐ Recreational Vehicle Parks☐ Supply voltage for more than 600 supply volts nominal**FEE SCHEDULE**

Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	4	\$4.26	\$17.04
Electrical Permit Fees			
Subtotal			\$98.18
State surcharge (12% of permit total)			\$11.78
TOTAL PERMIT FEE			\$109.96

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00837**

Approval Code: 05944G 9/24/2019 9:15 am

E-mailed To: haley@sunbridgesolar.com

B2019-4007

TYPE OF WORK

- ☐ New Construction ☒ Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- ☒ 1 or 2 family dwelling ☐ Multi-family ☐ Commercial ☐ Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 16605 SW OREGON JADE CT

City/State/ZIP: BEAVERTON, OR 97007

Suite/bldg./apt.no.:

Project Name: Ambati Solar System

Cross Street/directions to job site:

Tax map/parcel no.: 1S130DA03600

DESCRIPTION OF WORK

9.28kW rooftop solar pv system. (29) panasonic modules and (29) enphase microinverters. IronRidge racking system.

APPLICANT

Name: Haley Polk

Phone: 9713254164

Fax:

Email:

CONTRACTOR

Elec lic. no.: C1123

CCB lic. no.: 189787

Business Name: SUNBRIDGE SOLAR LLC

Contact:

Address: 706 W 17TH ST

City/State/ZIP: VANCOUVER, WA 98660

Phone: 5034076820

Fax:

Email: jordan@sunbridgesolar.com

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4
Reconnect Only: 1
All Other Services: 2

PLAN REVIEW

Please check all that apply:

- ☐ A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other

- ☐ Fire pumps
☐ Emergency systems
☐ Addition of a new motor load of 100 HP or more
☐ Six or more residential units in one structure
☐ Health care facilities

- ☐ Hazardous locations
☐ A service or feeder rated at 600 amps or more
☐ Buildings more than three stor
☐ Marinas and boat yards
☐ Floating buildings
☐ Commercial-use agricultural buildings
☐ Installation of a 150 KVA or larger separately derived sys
☐ "A", "E", or "I-2" or "I-3"
☐ Recreational Vehicle Parks
☐ Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE

Description	Qty.	Ea.	Total
Renewable Energy			
5.01 to 15 kva - pv	1	\$115.83	\$115.83
Electrical Permit Fees			
Subtotal			\$115.83
State surcharge (12% of permit total)			\$13.90
TOTAL PERMIT FEE			\$129.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**12725 SW Milikan Way
Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00838**

Approval Code: 45367P 9/24/2019 11:00 am

E-mailed To: lisap@roth-heat.com

B2019-4009

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14485 SW ARABIAN DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: IVEY/161729	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128CC00500	
DESCRIPTION OF WORK	
RECONNECT GAS FURNACE AND AIR CONDITIONER. INSTALL OUTDOOR GFCI	
APPLICANT	
Name: MATT IVEY	
Phone: 9717773968	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C535	CCB lic. no.: 14008
Business Name: ROTH ZACHRY HEATING INC	
Contact:	
Address: PO BOX 1265	
City/State/ZIP: CANBY, OR 97013	
Phone: 5032661249	Fax: 5032663478
Email: korym@roth-heat.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of Inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	2	\$4.26	\$8.52
Electrical Permit Fees			
Subtotal			\$89.66
State surcharge (12% of permit total)			\$10.76
TOTAL PERMIT FEE			\$100.42

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00839**

Approval Code: 90641J 9/24/2019 1:21 pm

E-mailed To: joet@garrettsign.com

B209-4012

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12305 SW HORIZON BLVD	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.: 15	
Project Name: Stretch Lab	
Cross Street/directions to job site:	
Tax map/parcel no.: 2S105AA02301	
DESCRIPTION OF WORK	
(1) illuminated wall sign.	
APPLICANT	
Name: Joe Taylor	
Phone: 3606939081	Fax: 3606935948
Email:	
CONTRACTOR	
Elec lic. no.: 37-21CLS	CCB lic. no.: 66826
Business Name: GARRETT SIGN CO INC	
Contact:	
Address: 811 HARNEY ST	
City/State/ZIP: VANCOUVER, WA 98660	
Phone: 3606939081	Fax: 3606935948
Email: GA@GARRETTSIGN.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Sign or outline lighting	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222

BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 9-24-19

Permit No: B2019-4015

Date Issued: 9-24-19

By: *ME*

Payment Type: Visa

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other	
JOB SITE INFORMATION AND LOCATION	
Job no:	Job address: 11550 SW 11th Street
City/State/ZIP: Beaverton Oregon 97005	
Subdiv/ldg apt. no.:	Project name: Remodel
Cross street/directions to job site: 11th & Alger	
Subdivision: <i>Vose</i>	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<i>Kitchen Remodel</i>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Kailoe Kinney	
Address: 11550 SW 11th Street	
City/State/ZIP: Beaverton Oregon 97005	
Phone: 971-404-5473	Fax:
E-mail: kailook@comcast.net	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Same as property owner	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Paul Langston	
Address: 6820 SW Dale AVE	
City/State/ZIP: Beaverton Oregon 97008	
Phone: (971) 294-5403	Fax:
E-mail: mailto:admin@langstonelectri	CCB lic. no.:
Electrical lic. no.: 221266	City or metro lic.:
Supervising electrician signature, required:	
Print name: Paul Langston	Date: 9/20/19
Authorized signature: <i>Paul Langston</i>	
Print name: Paul Langston	Date: 9/24/19

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input checked="" type="checkbox"/> Service or feeder 600amps or more	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		194.64		1
Each add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14		2
Each add'l branch circuit	6	4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees.				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			\$129.05	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* Number of inspections allowed per permit.

Form B-70-1002

REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 09/20/2019

Permit No.: B2019-2834

Date issued: 9-24-19

By: *HL*

Payment Type:

COB
Reimbursement

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input checked="" type="checkbox"/> Other: pump station	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 14798 SW Scholls Ferry Road
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.:	Project name: Meridian Pump Station
Cross street/directions to job site: Between SW Teal Blvd and SW 147th Place	
Subdivision:	Lot no.:
Tax map/parcel no.: 1S132DD00100	
DESCRIPTION OF WORK	
The project will replace an aging belowground water pump station with a new aboveground pump station. A new transformer and backup	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: City of Beaverton; Attn: Shella Sahu	
Address: 12725 SW Millikan Way	
City/State/ZIP: Beaverton, OR 97005	
Phone: (503) 350-4094	Fax:
E-mail: ssahu@beavertonoregon.gov	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: same as above	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Accurate Electric Unlimited, Inc.	
Address: PO Box 871866	
City/State/ZIP: Vancouver	
Phone: 360.567.3330	Fax: 360.567.3320
E-mail: jason@aeuinc.com	CCB lic. no.: 191346
Electrical lic. no.: 0638	City or metro lic.: 10397
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: Jason Dixon	Date: 9.19.19
Authorized signature: <i>[Signature]</i>	
Print name: Jason Dixon	Date: 9.19.19

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input checked="" type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders Installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps	1	229.34	229.34	2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders Installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit	20	4.26	85.20	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe: instruments, control devices	19	91.72	1,742.68	2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			2,057.22	
Plan review (25% of permit fee)			514.31	
State surcharge (12% of permit fee)			246.87	
TOTAL PERMIT FEE			\$2,818.39	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.

Form B70-1002

REV 10/17

**Beaverton****City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00832**

Approval Code: 07187G 9/23/2019 1:32 pm

E-mailed To: office@ericolsonelectricinc.com

B2019-3998

TYPE OF WORK☐ New Construction ☒ Addition/alteration/replacement**CATEGORY OF CONSTRUCTION**☐ 1 or 2 family dwelling ☐ Multi-family ☒ Commercial ☐ Accessory**JOB SITE INFORMATION AND LOCATION**

Job Address: 16165 SW REGATTA LN

City/State/ZIP: BEAVERTON, OR 97006

Suite/bldg./apt.no.: 700

Project Name: Bombay Pizza

Cross Street/directions to job site:

Tax map/parcel no.: 1S105BA02000

DESCRIPTION OF WORK

Kitchen remodel; 13 circuits (food prep, soda bar, beer/liquor bar, lighting, hood system, cooler & general)

APPLICANT

Name: eric olson

Phone: 3602581849

Fax: 3602581859

Email:

CONTRACTOR

Elec lic. no.: 37-1053C

CCB lic. no.: 179408

Business Name: ERIC OLSON ELECTRIC INC

Contact:

Address: 10013 NE HAZEL DELL AVE PMB#432

City/State/ZIP: VANCOUVER, WA 98685

Phone: 3602581849

Fax: 3602581859

Email: office@ericolsonelectricinc.com

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4

Reconnect Only: 1

All Other Services: 2

PLAN REVIEW

Please check all that apply:

☐ A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other☐ Fire pumps☐ Emergency systems☐ Addition of a new motor load of 100 HP or more☐ Six or more residential units in one structure☐ Health care facilities☐ Hazardous locations☐ A service or feeder rated at 600 amps or more☐ Buildings more than three stor☐ Marinas and boat yards☐ Floating buildings☐ Commercial-use agricultural buildings☐ Installation of a 150 KVA or larger separately derived sys☐ "A", "E", or "I-2" or "I-3"☐ Recreational Vehicle Parks☐ Supply voltage for more than 600 supply volts nominal**FEE SCHEDULE**

Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	12	\$4.26	\$51.12
Electrical Permit Fees			
Subtotal			\$132.26
State surcharge (12% of permit total)			\$15.87
TOTAL PERMIT FEE			\$148.13

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Beaverton
OREGON

City Of Beaverton
12725 SW Milikan Way
Beaverton, OR 97076
Phone: 503-526-2542
Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00831

B20A-3997

Approval Code: 513231 9/23/2019 1:13 pm

E-mailed To: CEPermit@cepdx.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 9100 SW GEMINI DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: C190213 - Cybertron	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127DB00302	
DESCRIPTION OF WORK	
Provide, install terminate and Cat6 cables.	
APPLICANT	
Name: Peter Bledsoe	
Phone: 5032559488	Fax: 5032577121
Email:	
CONTRACTOR	
Elec lic. no.: 26-1054CLE	CCB lic. no.: 142457
Business Name: CAPITOL DATA & COMMUNICATIONS INC	
Contact:	
Address: 11401 NE MARX	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: RICHARDM@CPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00830**

Approval Code: 03685G 9/23/2019 12:03 pm

E-mailed To: paul@timberlineelectric.com

B2009-3914

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 18300 NW WALKER RD	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: Building 16 Unit F	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131CB01500	
DESCRIPTION OF WORK	
Update switches receptacles kitchen lights add circuit for microwave	
APPLICANT	
Name: Timberline Contractors	
Phone: 503-459-4089	Fax: 503-245-4227
Email:	
CONTRACTOR	
Elec lic. no.: 26-1211C	CCB lic. no.: 160037
Business Name: TIMBERLINE ELECTRICAL CONTRACTORS INC	
Contact:	
Address: PO BOX 918	
City/State/ZIP: LAKE OSWEGO, OR 97034	
Phone: 5034594089	Fax: 5032544227
Email: pat@timberlineelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$93.92
State surcharge (12% of permit total)			\$11.27
TOTAL PERMIT FEE			\$105.19

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Millkan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00829**

Approval Code: 07360G 9/23/2019 10:29 am

E-mailed To: haley@sunbridgesolar.com

TYPE OF WORK☐ New Construction ☒ Addition/alteration/replacement**CATEGORY OF CONSTRUCTION**☒ 1 or 2 family dwelling ☐ Multi-family ☐ Commercial ☐ Accessory**JOB SITE INFORMATION AND LOCATION**

Job Address: 175 SW 172ND AVE

City/State/ZIP: BEAVERTON, OR 97006

Suite/bldg./apt.no.:

Project Name: Do Solar System

Cross Street/directions to job site:

Tax map/parcel no.: 1S106AB08100

DESCRIPTION OF WORK

4.96kW rooftop solar pv system. (16) Silfab modules and (1) SolarEdge inverter. IronRidge racking system.

APPLICANT

Name: Haley Polk

Phone: 9713254164

Fax:

Email:

CONTRACTOR

Elec lic. no.: C1123

CCB lic. no.: 189787

Business Name: SUNBRIDGE SOLAR LLC

Contact:

Address: 706 W 17TH ST

City/State/ZIP: VANCOUVER, WA 98660

Phone: 5034076820

Fax:

Email: jordan@sunbridgesolar.com

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4

Reconnect Only: 1

All Other Services: 2

PLAN REVIEW

Please check all that apply:

☐ A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other☐ Fire pumps☐ Emergency systems☐ Addition of a new motor load of 100 HP or more☐ Six or more residential units in one structure☐ Health care facilities☐ Hazardous locations☐ A service or feeder rated at 600 amps or more☐ Buildings more than three stor☐ Marinas and boat yards☐ Floating buildings☐ Commercial-use agricultural buildings☐ Installation of a 150 KVA or larger separately derived sys☐ "A", "E", or "I-2" or "I-3"☐ Recreational Vehicle Parks☐ Supply voltage for more than 600 supply volts nominal**FEE SCHEDULE**

Description	Qty.	Ea.	Total
Renewable Energy			
5 kva or less - pv	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Milikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00833**

Approval Code: 713212 9/23/2019 3:21 pm

E-mailed To: alma@badgerelectricinc.com

TYPE OF WORK

- ☐ New Construction ☒ Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- ☒ 1 or 2 family dwelling ☐ Multi-family ☐ Commercial ☐ Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 11810 SW BRUCE DR

City/State/ZIP: BEAVERTON, OR 97008

Suite/bldg./apt.no.:

Project Name:

Cross Street/directions to job site:

Tax map/parcel no.: 1S122BD04485

DESCRIPTION OF WORK

Service change and (2) circuits for AC and outside plug.

APPLICANT

Name: TODD GABER

Phone: 5032884756

Fax: 5034937173

Email:

CONTRACTOR

Elec lic. no.: 3-571C

CCB lic. no.: 156581

Business Name: BADGER ELECTRIC INC

Contact:

Address: PO BOX 55446

City/State/ZIP: PORTLAND, OR 97238

Phone: 5032884756

Fax: 5034937173

Email: badgerelectric@qwestoffice.net

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4

Reconnect Only: 1

All Other Services: 2

PLAN REVIEW

Please check all that apply:

- ☐ A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other
- ☐ Fire pumps
- ☐ Emergency systems
- ☐ Addition of a new motor load of 100 HP or more
- ☐ Six or more residential units in one structure
- ☐ Health care facilities
- ☐ Hazardous locations
- ☐ A service or feeder rated at 600 amps or more
- ☐ Buildings more than three stor
- ☐ Marinas and boat yards
- ☐ Floating buildings
- ☐ Commercial-use agricultural buildings
- ☐ Installation of a 150 KVA or larger seperately derived sys
- ☐ "A", "E", or "I-2" or "I-3"
- ☐ Recreational Vehicle Parks
- ☐ Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE

Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	2	\$4.26	\$8.52
Electrical Permit Fees			
Subtotal			\$124.35
State surcharge (12% of permit total)			\$14.92
TOTAL PERMIT FEE			\$139.27

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Fax: (503) 526-2550
Phone: (503) 526-2222
BeavertonOregon.gov

ELECTRONIC SUBMITTAL
SEE 1/BLDG DIV WG-8...

OFFICE USE ONLY

Date Received: 03/21/2019 Permit No.: B2019-1139
Date Issued: 9-23-19 By: [Signature]
CITY OF BEAVERTON
BUILDING DIVISION

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other: School
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 11375 SW Center ST.
City/State/ZIP: Beaverton/OR/97005	
Suite/bldg./apt. no.:	Project name: ACMA
Cross street/directions to job site: SW CENTER ST AND SW 113TH AVE	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Replacement of existing 1-story building with new 2-story building for Arts & Communication Magnet Academy (ACMA)	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Leslie Imes, Project Manager, Beaverton School District	
Address: 16550 SW Merlo Road	
City/State/ZIP: Beaverton, OR 97003	
Phone: (503) 356-4575	Fax:
E-mail: Leslie_Imes@beaverton.k12.or.us	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: [Signature] Date: 3/15/19	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: DLR Group	
Contact name: Oana Stephens, PE	
Address: 421 SW 6th Ave, Suite 1212	
City/State/ZIP: Portland/OR/97204	
Phone: (206) 461-6035	Fax:
E-mail: ostephens@dlrgroup.com	
CONTRACTOR	
Business name: AC&E Electric	
Address: 3535 Del Webb Ave. Suite 100	
City/State/ZIP: Salem, Or. 97301	
Phone: 503.363.2301	Fax:
E-mail: jeff@acandeelectric.com	CCB lic. no.: 591
Electrical lic. no.: 5391S	City or metro lic.: 8944
Supervising electrician signature, required: [Signature]	
Print name: Robert Kenny Gates	Date: 6.27.2019
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input checked="" type="checkbox"/> Service or feeder over 600 amps		
<input checked="" type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Marinas and boatyards			
<input checked="" type="checkbox"/> Emergency system	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Health-care facilities	<input checked="" type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	16	115.83	1,853.28	2
201 amps to 400 amps	5	137.89	689.45	2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps	1	299.93	299.93	2
Over 1,000 amps or volts	2	690.22	1,380.44	2
Utility reconnect	1	91.72	91.72	1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less	1	91.72	91.72	2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit	512	4.26	2,181.12	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting	1	91.72	91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			6,679.38	
Plan review (25% of permit fee)			1,669.85	
State surcharge (12% of permit fee)			801.53	
TOTAL PERMIT FEE			\$9,150.75	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
* Number of inspections allowed per permit.
Form 870-1002 REV 10/17

**City Of Beaverton**12725 SW Millikan Way
Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00828**

Approval Code: 610291 9/20/2019 2:19 pm

E-mailed To: info@all-pro-electric.com

TYPE OF WORK

- ☐
- New Construction
- ☒
- Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- ☒
- 1 or 2 family dwelling
- ☐
- Multi-family
- ☐
- Commercial
- ☐
- Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 7235 SW BENZ PARK DR

City/State/ZIP: BEAVERTON, OR 97225

Suite/bldg./apt.no.:

Project Name: 19-3170 Moreno

Cross Street/directions to job site:

Tax map/parcel no.: 1S112AB01300

DESCRIPTION OF WORK

Service upgrade, panel change, new range ckt, new dryer & washer ckt, move A/C, adjust light ckt in laundry

APPLICANT

Name: Kevin Poole

Phone: 5032460361

Fax: 5032460406

Email:

CONTRACTOR

Elec lic. no.: 26-1099C

CCB lic. no.: 148108

Business Name: ALL PRO ELECTRIC INCORPORATED

Contact:

Address: 6312 SW CAPITOL HWY STE 262

City/State/ZIP: PORTLAND, OR 97239

Phone: 5032460361

Fax: 5032460406

Email: info@all-pro-electric.com

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4

Reconnect Only: 1

All Other Services: 2

PLAN REVIEW

Please check all that apply:

- ☐
- A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other
-
- ☐
- Fire pumps
-
- ☐
- Emergency systems
-
- ☐
- Addition of a new motor load of 100 HP or more
-
- ☐
- Six or more residential units in one structure
-
- ☐
- Health care facilities
-
- ☐
- Hazardous locations
-
- ☐
- A service or feeder rated at 600 amps or more
-
- ☐
- Buildings more than three stor
-
- ☐
- Marinas and boat yards
-
- ☐
- Floating buildings
-
- ☐
- Commercial-use agricultural buildings
-
- ☐
- Installation of a 150 KVA or larger separately derived sys
-
- ☐
- "A", "E", or "I-2" or "I-3"
-
- ☐
- Recreational Vehicle Parks
-
- ☐
- Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE

Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	6	\$4.26	\$25.56
Electrical Permit Fees			
Subtotal			\$141.39
State surcharge (12% of permit total)			\$16.97
TOTAL PERMIT FEE			\$158.36

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**12725 SW Millikan Way
Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00827**

Approval Code: 114054 9/20/2019 9:40 am

E-mailed To: jerry@peakelectricgroup.com

B2019-3977

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12620 SW 13TH ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: 190589	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116DD06200	
DESCRIPTION OF WORK	
Service upgrade and relocation and 3 new circuits.	
APPLICANT	
Name: Jerry Larson	
Phone: 5035774311	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1109	CCB lic. no.: 206443
Business Name: PEAK ELECTRIC GROUP LLC	
Contact:	
Address: 11007 NE 109TH ST	
City/State/ZIP: VANCOUVER, WA 98662	
Phone: 3609844205	Fax:
Email: timb@peakelectricgroup.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$128.61
State surcharge (12% of permit total)			\$15.43
TOTAL PERMIT FEE			\$144.04

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Milikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00826**

Approval Code: 01921G 9/20/2019 9:27 am

E-mailed To: jabel@comfortflow.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14831 SW TEAL BLVD	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: MURRAY HILL VET 859454	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132AD00300	
DESCRIPTION OF WORK	
HVAC CONTROLS	
APPLICANT	
Name: Jaycee Abel	
Phone: 5413575871	Fax: 5417477274
Email:	
CONTRACTOR	
Elec lic. no.: 20-431CRE	CCB lic. no.: 460
Business Name: COMFORT FLOW HEATING CO	
Contact:	
Address: 1951 DON ST STE D	
City/State/ZIP: SPRINGFIELD, OR 97477	
Phone: 5417260100	Fax: 5417477274
Email: ap@comfortflow.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Milikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00825**

Approval Code: 047261 9/20/2019 9:01 am

E-mailed To: jen@redselectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 10115 SW HEATHER LN	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: filterer	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S123CB01100	
DESCRIPTION OF WORK	
Family room addition	
APPLICANT	
Name: Jen Cain	
Phone: 5032336467	Fax: 5032331281
Email:	
CONTRACTOR	
Elec lic. no.: 26-152C	CCB lic. no.: 4443
Business Name: REDS ELECTRIC CO INC	
Contact:	
Address: PO BOX 68999	
City/State/ZIP: PORTLAND, OR 97268	
Phone: 5032336467	Fax: 5032331281
Email: brandl@redselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00824**

Approval Code: 06450G 9/19/2019 5:12 pm

E-mailed To: service@clackamaselectric.com

TYPE OF WORK

- ☐ New Construction ☒ Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- ☒ 1 or 2 family dwelling ☐ Multi-family ☐ Commercial ☐ Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 14274 SW FARMINGTON RD

City/State/ZIP: BEAVERTON, OR 97005

Suite/bldg./apt.no.:

Project Name: CC-Plantation-20071

Cross Street/directions to job site:

Tax map/parcel no.: 1S116BC03400

DESCRIPTION OF WORK

Carport Fire , Rewire of carport

APPLICANT

Name: Scott Johnston

Phone: 5036322420

Fax: 5036322421

Email:

CONTRACTOR

Elec lic. no.: 3-606C

CCB lic. no.: 161923

Business Name: CLACKAMAS ELECTRIC INC

Contact:

Address: PO BOX 51

City/State/ZIP: BEAVERCREEK, OR 97004

Phone: 5036322420

Fax: 5036322421

Email: donna@clackamaselectric.com

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4
Reconnect Only: 1
All Other Services: 2

PLAN REVIEW**Please check all that apply:**

- ☐ A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other
- ☐ Fire pumps
- ☐ Emergency systems
- ☐ Addition of a new motor load of 100 HP or more
- ☐ Six or more residential units in one structure
- ☐ Health care facilities
- ☐ Hazardous locations
- ☐ A service or feeder rated at 600 amps or more
- ☐ Buildings more than three stor
- ☐ Marinas and boat yards
- ☐ Floating buildings
- ☐ Commercial-use agricultural buildings
- ☐ Installation of a 150 KVA or larger separately derived sys
- ☐ "A", "E", or "I-2" or "I-3"
- ☐ Recreational Vehicle Parks
- ☐ Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE

Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	4	\$4.26	\$17.04
Electrical Permit Fees			
Subtotal			\$98.18
State surcharge (12% of permit total)			\$11.78
TOTAL PERMIT FEE			\$109.96

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00822**

Approval Code: 719162 9/19/2019 3:26 pm

E-mailed To: CEpermits@cepdx.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 8775 SW CASCADE AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Matress HVAC	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S1270000600	
DESCRIPTION OF WORK	
Matress world. Suite 100. Replace (3) disconnects on RTU's with new because new RTU's were installed.	
APPLICANT	
Name: Capitol Electric	
Phone: 5032559488	Fax: 5032577121
Email:	
CONTRACTOR	
Elec lic. no.: 26-496C	CCB lic. no.: 48748
Business Name: CAPITOL ELECTRIC CO INC	
Contact:	
Address: 11401 NE MARX ST	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: DARRELL@CEPDx.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care faciltities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	2	\$4.26	\$8.52
Electrical Permit Fees			
Subtotal			\$89.66
State surcharge (12% of permit total)			\$10.76
TOTAL PERMIT FEE			\$100.42

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Millkan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00823**

Approval Code: 819102 9/19/2019 4:20 pm

E-mailed To: drew@protechpdx.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14350 SW BONNIE BRAE ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Driessen	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116CC00524	
DESCRIPTION OF WORK	
Kitchen remodel and lighting upgrade	
APPLICANT	
Name: Drew Anderson	
Phone: 5037806207	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C916	CCB lic. no.: 198878
Business Name: PRO TECH POWER CORP	
Contact:	
Address: PO BOX 988	
City/State/ZIP: DALLAS, OR 97338	
Phone: 5037806207	Fax: 5036236023
Email: ba_acct@msn.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Health care facilities		
<input type="checkbox"/> Six or more residential units in one structure			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	4	\$4.26	\$17.04
Electrical Permit Fees			
Subtotal			\$98.18
State surcharge (12% of permit total)			\$11.78
TOTAL PERMIT FEE			\$109.96

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00821**

Approval Code: 019727 9/19/2019 1:51 pm

E-mailed To: anitap@gbmanchester.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 2180 SW 170TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: BEAVERTON SD MAINTENANCE SERVICES	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S107AA00600	
DESCRIPTION OF WORK	
LIMITED ENERGY FOR STRUCTURED CABLING TO CAMERAS	
APPLICANT	
Name: ANITA PASO	
Phone: 360-816-0484	Fax: 360-573-9866
Email:	
CONTRACTOR	
Elec lic. no.: CLE368	CCB lic. no.: 202097
Business Name: GB MANCHESTER INC	
Contact:	
Address: A CORPORATION OF WASHINGTON	
City/State/ZIP: VANCOUVER, WA 98665	
Phone: 3608160484	Fax: 3608160482
Email: BILL.H@GBMANCHESTER.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations		
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more		
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor		
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards		
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings		
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings		
	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys		
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"		
	<input type="checkbox"/> Recreational Vehicle Parks		
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**12725 SW Millikan Way
Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00820**

Approval Code: 039549 9/19/2019 1:30 pm

E-mailed To: AFARIAS@TESLA.COM

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 16715 NW MISSION OAKS DR	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131AD01900	
DESCRIPTION OF WORK	
sub panel for ev charger	
APPLICANT	
Name: Melissa FARIAS	
Phone: 5038946903	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C562	CCB lic. no.: 180498
Business Name: TESLA ENERGY OPERATIONS INC	
Contact:	
Address: 901 PAGE AVE	
City/State/ZIP: FREMONT, CA 94538	
Phone: 6509635100	Fax: 8665922249
Email: businesslicenses@tesla.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Temp services or feeders			
Temp services 200 amps or less	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$207.55
State surcharge (12% of permit total)			\$24.91
TOTAL PERMIT FEE			\$232.46

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Renewable Electrical Energy Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 09/09/2019 Permit No.: B2019-2814
Date Issued: 9/18/19 By: [Signature]
CITY OF BEAVERTON
BUILDING DIVISION
Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 8710 SW Maverick Terrace
City/State/ZIP: Portland, OR 97008	
Suite/bldg./apt. no.:	Project name: Cottrell
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installation of 4.34kW solar photovoltaic system	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Carlton Cottrell	
Address: 8710 SW Maverick Terrace	
City/State/ZIP: Beaverton, OR 97008	
Phone: 503-939-7881	Fax:
E-mail: carltoncottrell@gmail.com	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
CONTRACTOR	
Business name: Imagine Energy	
Address: 7001 NE Columbia Blvd	
City/State/ZIP: Portland, OR 97218	
Phone: 5419122390	Fax:
E-mail: H.Kearns@imagineenergy.net	CCB lic. no.: 167964
Electrical lic. no.: 50975	City or metro lic.:
Supervising electrician signature, required: [Signature]	
Print name: Grant R. Longhlin	Date: 09/05/19
Authorized signature: [Signature]	
Print name: Heath Kearns	Date: 09/05/19

FEE SCHEDULE			
Number of inspections per item () Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)	1	81.14	
5.01 to 15 kva (2)		115.83	
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) (OAR 918-309-0070)		81.14	
FEE TOTALS			Recalculate
Subtotal			0.00
<< Check box if plan review is required			
Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

Form B70-1005

REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222

BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 9-20-19	Permit No.: B2019-3966
Date Issued: 9-20-19	By: JUK
Payment Type: Visa	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 4130 SW 117th Ave.
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.: B,D & E	Project name: Canyon Square
Cross street/directions to job site: SW Canyon Rd.	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Disconnecting/reconnecting electrical to new RTU's.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Same as Below.	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Willamette HVAC L.L.C.	
Address: 3075 SE Century Blvd. Suite 206	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 259-3200	Fax:
E-mail: mmalstrom@willamettehvac.com	CCB lic. no.: 56951
Electrical lic. no.: 34-346CRE	City or metro lic.:
Supervising electrician signature, required: <i>Mike Sicard</i>	
Print name: Mike Sicard	Date: 09/18/19
Authorized signature: <i>Michael Malstrom</i>	
Print name: Michael Malstrom	Date: 09/18/19

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Service or feeder 400amps or more <input type="checkbox"/> Fire pump <input type="checkbox"/> Emergency system <input type="checkbox"/> Addition of new motor load of 100HP or more <input type="checkbox"/> Six or more residential units <input type="checkbox"/> Health-care facilities <input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit	1	81.14	81.14	2
Each add'l branch circuit	2	4.26	8.52	
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			89.66	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			10.76	
TOTAL PERMIT FEE			\$100.42	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.

Form 870-1002

REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received:

Date Issued:

Permit No.:

Payment Type:

TYPE OF WORK

- ☐ New construction ☒ Addition/alteration/replacement
☐ Other:

CATEGORY OF CONSTRUCTION

- ☐ 1- and 2-family dwelling ☒ Commercial/industrial ☐ Accessory building
☐ Multi-family ☐ Master builder ☐ Other:

JOB SITE INFORMATION AND LOCATION

Job no.: Job address: 14001 SW Teal Blvd

City/State/ZIP: Beaverton, OR 97007

Suite/bldg./apt. no.: Project name: Murray Hill Vet Clinic

Cross street/directions to job site:

Subdivision: Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK

(1) Ckt for pole light relocation

☐ PROPERTY OWNER☐ TENANT

Name:

Address:

City/State/ZIP:

Phone:

Fax:

E-mail:

Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.

Owner signature: Date:

☐ APPLICANT☐ CONTACT PERSON

Business name:

Contact name:

Address:

City/State/ZIP:

Phone:

Fax:

E-mail:

CONTRACTOR

Business name: JC Electric, Inc.

Address: 9014 NE St Johns Rd #101

City/State/ZIP: Vancouver WA 98665

Phone: (360) 887-7889

Fax:

E-mail: jconsiglio@jce.us

CCB lic. no.: 118452

Electrical lic. no.: 37-724C

City or metro lic.: 5108

Supervising electrician signature, required:

Print name: Jon Coulmore 4289S

Date: 09/16/19

Authorized signature:

Print name:

Date:

PLAN REVIEW

Please check all that apply:

- ☐ Service or feeder 400amps or more
☐ Fire pump
☐ Emergency system
☐ Addition of new motor load of 100HP or more
☐ Six or more residential units
☐ Health-care facilities
☐ Hazardous locations

- ☐ Service or feeder over 600 amps
☐ Building over three stories
☐ Marinas and boatyards
☐ Floating buildings
☐ Commercial-use agricultural buildings
☐ Installation of 150 KVA or larger separately derived system
☐ "A," "E," "I-2," "I-3" occupancy
☐ Recreational vehicle parks

FEE SCHEDULE

Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14	81.14	2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			81.14	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			9.74	
TOTAL PERMIT FEE			\$90.88	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit

Form B70-1002

REV 10/17

**Electrical Permit Application**

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222

BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 9-19-19	Permit No.: 32019-3947
Date Issued: 9-19-19	By: JMS
Payment Type: Visa	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master bulidder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 12325 SW Horizon Blvd
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.: Ste 31	Project name: Deka Lash
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Sign Circuit	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: Deka Lash	
Address: 12325 SW Horizon Blvd Ste 31	
City/State/ZIP: Beaverton, OR 97007	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Hannah Sign Systems	
Contact name: Dave Lanphere	
Address: 1680 SW Bertha Blvd	
City/State/ZIP: Portland, OR 97219	
Phone: (503) 946-8373	Fax: (503) 206-4900
E-mail: davel@hannahsignsystems.com	
CONTRACTOR	
Business name: Hannah Sign Systems	
Address: 1680 SW Bertha Blvd	
City/State/ZIP: Portland, OR 97219	
Phone: (503) 946-8373	Fax: (503) 206-4900
E-mail: davel@hannahsignsystems.com	COB lic. no.: 203638
Electrical lic. no.: CLS34	City or metro lic.: 11533
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: Dave Demuth	Date: 9/19/19
Authorized signature: <i>[Signature]</i>	
Print name: Dave Lanphere	Date: 9/19/19

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks	
<input type="checkbox"/> Service or feeder 400amps or more <input type="checkbox"/> Fire pump <input type="checkbox"/> Emergency system <input type="checkbox"/> Addition of new motor load of 100HP or more <input type="checkbox"/> Six or more residential units <input type="checkbox"/> Health-care facilities <input type="checkbox"/> Hazardous locations			
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit			
Includes attached garage			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14	2
Each add'l branch circuit		4.26	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting		91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
Each additional inspection over allowable in any of the above			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$102.73

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* Number of inspections allowed per permit.

Form 070-1002 REV 10/17

**City Of Beaverton**

12725 SW Milikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00817**

Approval Code: 06949Z 9/19/2019 7:02 am

E-mailed To: portlandpermits@cochraninc.com

TYPE OF WORK

- ☐ New Construction ☒ Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- ☐ 1 or 2 family dwelling ☐ Multi-family ☒ Commercial ☐ Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 15901 SW JENKINS RD

City/State/ZIP: BEAVERTON, OR 97006

Suite/bldg./apt.no.:

Project Name: Costco Aloha

Cross Street/directions to job site:

Tax map/parcel no.: 1S105CC00402

DESCRIPTION OF WORK

WO49079 PM521 Costco Aloha
Relocate cardboard and plastic compactors in loading dock / provide two new 480v
3 phase circuits
Bill Edwards is Electrician

APPLICANT

Name: Stephanie Swenson

Phone: 9712054256

Fax: 9712054268

Email:

CONTRACTOR

Elec lic. no.: 37-546C

CCB lic. no.: 72942

Business Name: COCHRAN INC

Contact:

Address: 7550 SW TECH CENTER DRIVE #220

City/State/ZIP: TIGARD, OR 97223

Phone: 9712054242

Fax: 9712054268

Email: MGROGAN@COCHRANINC.COM

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4
Reconnect Only: 1
All Other Services: 2

PLAN REVIEW

Please check all that apply:

- ☐ A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other
- ☐ Fire pumps
- ☐ Emergency systems
- ☐ Addition of a new motor load of 100 HP or more
- ☐ Six or more residential units in one structure
- ☐ Health care facilities
- ☐ Hazardous locations
- ☐ A service or feeder rated at 600 amps or more
- ☐ Buildings more than three stor
- ☐ Marinas and boat yards
- ☐ Floating buildings
- ☐ Commercial-use agricultural buildings
- ☐ Installation of a 150 KVA or larger separately derived sys
- ☐ "A", "E", or "I-2" or "I-3"
- ☐ Recreational Vehicle Parks
- ☐ Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE

Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12726 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00818**

Approval Code: 00564G 9/19/2019 7:25 am

E-mailed To: crystalr@westsideelectric.com

TYPE OF WORK

- ☐
- New Construction
- ☒
- Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- ☐
- 1 or 2 family dwelling
- ☐
- Multi-family
- ☒
- Commercial
- ☐
- Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 10300 SW ALLEN BLVD

City/State/ZIP: BEAVERTON, OR 97005

Suite/bldg./apt.no.:

Project Name: P03766-EPIQ SYSTEMS

Cross Street/directions to job site:

Tax map/parcel no.: 1S123BB00300

DESCRIPTION OF WORK

POWER FOR PRINTER UPGRADES

APPLICANT

Name: CRYSTAL KREGER

Phone: 5032311548

Fax:

Email:

CONTRACTOR

Elec lic. no.: 26-135C

CCB lic. no.: 13306

Business Name: WEST SIDE ELECTRIC COMPANY INC

Contact:

Address: 1834 SE 8TH AVE

City/State/ZIP: PORTLAND, OR 972143532

Phone: 5032311548

Fax: 5037360677

Email: DICKK@WESTSIDELECTRIC.COM

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4

Reconnect Only: 1

All Other Services: 2

PLAN REVIEW

Please check all that apply:

- | | |
|---|---|
| <input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other | <input type="checkbox"/> Hazardous locations |
| <input type="checkbox"/> Fire pumps | <input type="checkbox"/> A service or feeder rated at 600 amps or more |
| <input type="checkbox"/> Emergency systems | <input type="checkbox"/> Buildings more than three stor |
| <input type="checkbox"/> Addition of a new motor load of 100 HP or more | <input type="checkbox"/> Marinas and boat yards |
| <input type="checkbox"/> Six or more residential units in one structure | <input type="checkbox"/> Floating buildings |
| <input type="checkbox"/> Health care facilities | <input type="checkbox"/> Commercial-use agricultural buildings |
| | <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys |
| | <input type="checkbox"/> "A", "E", or "I-2" or "I-3" |
| | <input type="checkbox"/> Recreational Vehicle Parks |
| | <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal |

FEE SCHEDULE

Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	5	\$4.26	\$21.30
Electrical Permit Fees			
Subtotal			\$102.44
State surcharge (12% of permit total)			\$12.29
TOTAL PERMIT FEE			\$114.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Milikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00819**

Approval Code: 096896 9/19/2019 9:00 am

E-mailed To: cacey.chapman@ecpowerslife.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 3475 SW CEDAR HILLS BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Chase Bank	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S1090000200	
DESCRIPTION OF WORK	
Swap out (2) RTU's	
APPLICANT	
Name: Cacey Chapman	
Phone: 5032285737	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-45C	CCB lic. no.: 49737
Business Name: EC COMPANY	
Contact:	
Address: PO BOX 10286	
City/State/ZIP: PORTLAND, OR 97296	
Phone: 5032243511	Fax: 5032953012
Email: cindyb@e-c-co.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222 V/TDD
BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 9/18/2019	Permit No.: 32019-3920
Date Issued: 9/19/2019	Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: R/R Signs for Rebrand	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 4400 SW Rose Lane
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg/apt. no.:	Project name: Caliber Collision
Cross street/directions to job site: SW Farmington & SW Rose	
Subdivision:	Lot no.:
Tax map/parcel no.: 1S116BD00600	
DESCRIPTION OF WORK	
Removing existing signs and replacing/refacing with updated re-brand for Caliber Collision	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: Caliber Collision	
Address: 4400 SW Rose Lane	
City/State/ZIP: Beaverton, OR 97005	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: ES & A Sign and Awning Co.	
Contact name: Carolyn Goodman	
Address: 89975 Prairie Road	
City/State/ZIP: Eugene, OR 97402	
Phone: (541) 868-2381	Fax: (541) 868-5813
E-mail: cgoodman@esasigns.com	
CONTRACTOR	
Business name: ES & A Sign and Awning Co.	
Address: 89975 Prairie Road	
City/State/ZIP: Eugene, OR 97402	
Phone: (541) 868-2381	Fax: (541) 485-5813
E-mail: cgoodman@esasigns.com	CCB lic. no.: 163470
Electrical lic. no.: 20-543-CLS	City or metro lic.: 8461
Supervising electrician signature, required: <i>Gordy Roseboro</i>	
Print name: Gordy Roseboro	Date: 09/16/19
Authorized signature: <i>Carolyn Goodman</i>	Date: 09/16/19

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 800 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Service or feeder 400amps or more <input type="checkbox"/> Fire pump <input type="checkbox"/> Emergency system <input type="checkbox"/> Addition of new motor load of 100HP or more <input type="checkbox"/> Six or more residential units <input type="checkbox"/> Health-care facilities <input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		168.52		4
Ea. add'l 500 sq. ft. or portion		30.10		
Limited energy, residential (with above sq. ft.)		40.19		2
Limited energy, multi-family residential (with above sq. ft.)		79.41		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		100.28		2
201 amps to 400 amps		119.38		2
401 amps to 600 amps		198.56		2
601 amps to 1,000 amps		259.68		2
Over 1,000 amps or volts		597.59		2
Utility reconnect		79.41		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		79.41		2
201 amps to 400 amps		110.31		2
401 amps to 600 amps		159.40		2
601 amps to 1,000 amps		195.05		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.69		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		70.25		2
Each add'l branch circuit		3.69		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		79.41		2
Pump or irrigation circle		79.41		2
Sign or outline lighting	2	79.41		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		79.41		2
Each additional inspection over allowable in any of the above				
Per inspection		70.25		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			158.82	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			19.06	
TOTAL PERMIT FEE			\$177.88	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

105 45



Renewable Electrical Energy Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Recd: 09/18/2019 Permit No.: B2019-3915

Date Issued: 9/18/2019

Payment Type:

TYPE OF WORK

☐ New construction

☒ Addition/alteration/replacement

☒ Other: SOLAR

CATEGORY OF CONSTRUCTION

☒ 1- and 2-family dwelling

☐ Commercial/industrial

☐ Accessory building

☐ Multi-family

☐ Other:

JOB SITE INFORMATION AND LOCATION

Job no.:

Job address: 7830 SW Everett CT

City/State/ZIP: Beaverton, OR 97007

Suite/bldg./apt. no.:

Project name:

Cross street/directions to job site:

Subdivision:

Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK

SOLAR PV INSTALLATION
9.61 KW

☒ PROPERTY OWNER

☐ TENANT

Name: SANDS, William

Address: 7830 SW Everett CT

City/State/ZIP: Beaverton, OR 97007

Phone: 503-810-8233

Fax:

E-mail:

Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.

Owner signature: _____

Date: _____

CONTRACTOR

Business name: PROSTAT ELECTRIC

Address: 1721 NE 64th Ave

City/State/ZIP: Vancouver, WA 98661

Phone: 503-539-7772

Fax:

E-mail: dale.krueger@comcast.net

ECB lic. no.:

188902

Electrical lic. no.:

C597

City or metro lic.:

Supervising electrician signature, required: Dale Krueger

Print name: DALE KRUEGER

Date: 9/12/19

Authorized signature: Dale Krueger

Print name: DALE KRUEGER

Date: 9/12/19

FEE SCHEDULE

Number of inspections per item (1) Renewable energy installation per system total	No. of items	Cost Each	Total
6 kva or less (2)		81.14	
5.01 to 15 kva (2)	1	115.83	115.83
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) (OAR 915-309-0070)		81.14	

FEE TOTALS

Recalculate

Subtotal

0.00

<< Check box if plan review is required

Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)

State surcharge (12% of permit fee)

0.00

TOTAL PERMIT FEE \$129.73

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

Form B70-1005

REV 10/17

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00816**

Approval Code: 04409G 9/18/2019 2:51 pm

E-mailed To: haley@sunbridgesolar.com

B2019-3940

TYPE OF WORK☐ New Construction☒ Addition/alteration/replacement**CATEGORY OF CONSTRUCTION**☒ 1 or 2 family dwelling☐ Multi-family☐ Commercial☐ Accessory**JOB SITE INFORMATION AND LOCATION**

Job Address: 12225 SW FULMAR TER

City/State/ZIP: BEAVERTON, OR 97007

Suite/bldg./apt.no.:

Project Name: Sivagnanam Solar System

Cross Street/directions to job site:

Tax map/parcel no.: 2S105BB10400

DESCRIPTION OF WORK

9.28kW rooftop solar pv system. (29) Panasonic modules (29) Enphase microinverters. IronRidge racking system.

APPLICANT

Name: Haley Polk

Phone: 9713254164

Fax:

Email:

CONTRACTOR

Elec lic. no.: C1123

CCB lic. no.: 189787

Business Name: SUNBRIDGE SOLAR LLC

Contact:

Address: 706 W 17TH ST

City/State/ZIP: VANCOUVER, WA 98660

Phone: 5034076820

Fax:

Email: jordan@sunbridgesolar.com

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4

Reconnect Only: 1

All Other Services: 2

PLAN REVIEW

Please check all that apply:

☐ A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other☐ Fire pumps☐ Emergency systems☐ Addition of a new motor load of 100 HP or more☐ Six or more residential units in one structure☐ Health care facilities☐ Hazardous locations☐ A service or feeder rated at 600 amps or more☐ Buildings more than three stor☐ Marinas and boat yards☐ Floating buildings☐ Commercial-use agricultural buildings☐ Installation of a 150 KVA or larger separately derived sys☐ "A", "E", or "I-2" or "I-3"☐ Recreational Vehicle Parks☐ Supply voltage for more than 600 supply volts nominal**FEE SCHEDULE**

Description	Qty.	Ea.	Total
Renewable Energy			
5.01 to 15 kva - pv	1	\$115.83	\$115.83
Electrical Permit Fees			
Subtotal			\$115.83
State surcharge (12% of permit total)			\$13.90
TOTAL PERMIT FEE			\$129.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00815

Approval Code: 504778 9/18/2019 2:32 pm

E-mailed To: trunghrothers@gmail.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 3615 SW HALL BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Renu Chiropractic	
Cross Street/directions to job site: Hall Blvd	
Tax map/parcel no.: 1S109DD00106	
DESCRIPTION OF WORK	
Install fire panel	
APPLICANT	
Name: Trung Nguyen	
Phone: 5037930871	Fax: 5036126603
Email:	
CONTRACTOR	
Elec lic. no.: C280	CCB lic. no.: 175531
Business Name: VAST ELECTRIC INC	
Contact:	
Address: 207 8TH ST	
City/State/ZIP: OREGON CITY, OR 97045	
Phone: 5037930871	Fax: 5035858828
Email: VASTELECTRIC@COMCAST.NET	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Limited Energy			
Stand-alone limited energy, commercial	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00813**

Approval Code: 005346 9/18/2019 11:46 am

E-mailed To: donwilsue4@aol.com

B2019-3931

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12072 SW WINDMILL DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Redwood Creek	
Cross Street/directions to job site: Bld 20 Reconnect only	
Tax map/parcel no.: 1S1270000208	
DESCRIPTION OF WORK	
Reconnect inspection for power disconnected for non payment	
APPLICANT	
Name: Chris Riehle	
Phone: 5034770704	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C427	CCB lic. no.: 95163
Business Name: QUALITY PLUS FRAMING & ELECTRICAL INC	
Contact:	
Address: 16037 SW BOWMAN LN	
City/State/ZIP: SHERWOOD, OR 97140	
Phone: 5037991639	Fax:
Email: donwilsue4@aol.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Reconnect only	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Milikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00814**

Approval Code: 005286 9/18/2019 11:48 am

E-mailed To: donwilsue4@aol.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12070 SW WINDMILL DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Redwood Creek	
Cross Street/directions to job site: Bld 20 reconnect	
Tax map/parcel no.: 1S1270000208	
DESCRIPTION OF WORK	
Reconnect inspection for power disconnected for non payment	
APPLICANT	
Name: Chris Riehle	
Phone: 5034770704	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C427	CCB lic. no.: 95163
Business Name: QUALITY PLUS FRAMING & ELECTRICAL INC	
Contact:	
Address: 16037 SW BOWMAN LN	
City/State/ZIP: SHERWOOD, OR 97140	
Phone: 5037991639	Fax:
Email: donwilsue4@aol.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Reconnect only	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Milikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00811**

Approval Code: 082541 9/18/2019 9:16 am

E-mailed To: dorear@globalelectricusa.com

B2019-3928

TYPE OF WORK

- ☐ New Construction ☒ Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- ☒ 1 or 2 family dwelling ☐ Multi-family ☐ Commercial ☐ Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 15885 SW BARNARD CT

City/State/ZIP: BEAVERTON, OR 97007

Suite/bldg./apt.no.:

Project Name: Replace Main Breaker

Cross Street/directions to job site:

Tax map/parcel no.: 1S120CD05200

DESCRIPTION OF WORK

Replace 125A Main Breaker in panel

APPLICANT

Name: Dustin O'Rear

Phone: 5036806890

Fax: 5036475649

Email:

CONTRACTOR

Elec lic. no.: 34-655C

CCB lic. no.: 156838

Business Name: GLOBAL ELECTRIC INC

Contact:

Address: PO BOX 162

City/State/ZIP: NORTH PLAINS, OR 97133

Phone: 5036475650

Fax: 5036475649

Email: globalelectric@globalelectricusa.com

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4

Reconnect Only: 1

All Other Services: 2

PLAN REVIEW

Please check all that apply:

- ☐ A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other
- ☐ Fire pumps
- ☐ Emergency systems
- ☐ Addition of a new motor load of 100 HP or more
- ☐ Six or more residential units in one structure
- ☐ Health care facilities
- ☐ Hazardous locations
- ☐ A service or feeder rated at 600 amps or more
- ☐ Buildings more than three stor
- ☐ Marinas and boat yards
- ☐ Floating buildings
- ☐ Commercial-use agricultural buildings
- ☐ Installation of a 150 KVA or larger separately derived sys
- ☐ "A", "E", or "I-2" or "I-3"
- ☐ Recreational Vehicle Parks
- ☐ Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE

Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Electrical Permit Fees			
Subtotal			\$115.83
State surcharge (12% of permit total)			\$13.90
TOTAL PERMIT FEE			\$129.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00812**

Approval Code: 04970B 9/18/2019 11:28 am

E-mailed To: mikeselectric@mikeselectric.biz

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6175 SW ERICKSON AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121AB07500	
DESCRIPTION OF WORK	
LIVING ROOM LIGHT & PLUG, BATHROOM PLUGS, 2X BEDROOM LIGHTS AND PLUGS, BATHROOM LIGHTS, MASTER BEDROOM LIGHTS & PLUGS, ENTRY & HALLWAY LIGHTS & PLUGS, SMOKE DETECTORS	
APPLICANT	
Name: Darryl Mollenhauer	
Phone: 5036496991	Fax: 5032967860
Email:	
CONTRACTOR	
Elec lic. no.: C643	CCB lic. no.: 191094
Business Name: MOLLENHAUER ENTERPRISES INC	
Contact:	
Address: 11070 SW ALLEN BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5036496991	Fax: 5036411902
Email: mikeselectric@mikeselectric.biz	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities		<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	7	\$4.26	\$29.82
Electrical Permit Fees			
Subtotal			\$110.96
State surcharge (12% of permit total)			\$13.32
TOTAL PERMIT FEE			\$124.28

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**Electrical Permit Application**

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222

BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 9-18-19

Permit No.: 82019-3933

Date Issued: 9-18-19

By: MK

Payment Type: Visa

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
	<input checked="" type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Other:
ON-SITE INFORMATION AND LOCATION	
Job no.:	Job address: 10194 SW Park Way
City/State/ZIP: Portland, OR 97225	Project name: FOREVER PET
Suite/bldg./apt. no.:	
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Add 2 20 amp OTHs For NEW Equipment.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Gribble Electric LLC	
Contact name: Mark Gribble	
Address: P.O. Box 1106	
City/State/ZIP: Sherwood OR 97140	
Phone: 503-625-9623	Fax:
E-mail: gribbleelectric@gmail.com	
CONTRACTOR	
Business name: Gribble Electric LLC	
Address: P.O. Box 1106	
City/State/ZIP: Sherwood OR 97140	
Phone: 503-730-3551	Fax:
E-mail: gribbleelectric@gmail.com	CCR lic. no.: 225658
Electrical lic. no.: C1462	City or metro lic.: 13456
Supervising electrician signature: Matt Weber	
Print name: Matt Weber	Date: 9/18/19
Authorized signature: Mark Gribble	
Print name: Mark Gribble	Date: 9/18/19

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy <input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Service or feeder 400 amps or more <input type="checkbox"/> Fire pump <input type="checkbox"/> Emergency system <input type="checkbox"/> Addition of new motor load of 100HP or more <input type="checkbox"/> Six or more residential units <input type="checkbox"/> Health-care facilities <input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit (includes attached garage)				
1,000 sq. ft. or less		194.64	0.00	4
Ea. add'l 500 sq. ft. or portion		34.77	0.00	
Limited energy, residential (with above sq. ft.)		46.42	0.00	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	0.00	2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83	0.00	2
201 amps to 400 amps		137.89	0.00	2
401 amps to 600 amps		229.34	0.00	2
601 amps to 1,000 amps		299.93	0.00	2
Over 1,000 amps or volts		690.22	0.00	2
Utility reconnect		91.72	0.00	1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72	0.00	2
201 amps to 400 amps		127.41	0.00	2
401 amps to 600 amps		184.11	0.00	2
601 amps to 1,000 amps		225.29	0.00	2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26	0.00	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72	0.00	2
Pump or irrigation circle		91.72	0.00	2
Sign or outline lighting		91.72	0.00	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	0.00	2
Each additional inspection over allowable in any of the above				
Per inspection		81.14	0.00	
Investigation fee				
Other:				
Electrical permit fees:				
SUBTOTAL		0.00		
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)		0.00		
TOTAL PERMIT FEE		85.60		

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* Number of inspections allowed per permit.

Form B70-1002

REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received: <u>9/18/2019</u>	Permit No.: <u>B2019-3934</u>
Date Issued:	<u>OK</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: <u>0393</u>	Job address: <u>13725 SW MILLIKAN WAY</u>
City/State/ZIP: <u>BEAVERTON OR 97005</u>	
Suite/bldg./apt. no.:	Project name: <u>GM NAMEPLATE</u>
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>INSTALL ELECTRICAL POWER TO (2) AIR COMPRESSORS & (1) DRYER</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>PHOENIX ELECTRIC</u>	
Address: <u>P.O. Box 14037</u>	
City/State/ZIP: <u>PORTLAND OR 97293</u>	
Phone: <u>503-231-8006</u>	Fax:
E-mail: <u>terryk@phoenixpdx.com</u>	CGP lic. no.: <u>162753</u>
Electrical lic. no.: <u>C89</u>	City or metro lic.: <u>8469</u>
Supervising electrician signature, required: <u>Terry Koch</u>	
Print name: <u>TERRY KOCH</u>	Date: <u>9-13-2019</u>
Authorized signature: <u>Terry Koch</u>	
Print name: <u>TERRY KOCH</u>	Date: <u>9-13-2019</u>

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Service or feeder 400amps or more <input type="checkbox"/> Fire pump <input type="checkbox"/> Emergency system <input type="checkbox"/> Addition of new motor load of 100HP or more <input type="checkbox"/> Six or more residential units <input type="checkbox"/> Health-care facilities <input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	<u>2</u>	115.83	<u>231.66</u>	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit	<u>2</u>	4.26	<u>8.52</u>	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			<u>240.180.00</u>	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			<u>28.82</u>	0.00
TOTAL PERMIT FEE			<u>269.00</u>	\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form 870-1002 REV 10/17



Renewable Electrical Energy Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222

BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 7/11/2019 Permit No.: B2019-3824

Date Issued: By:

CITY OF BEAVERTON
BUILDING DIVISION

Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: Solar PV	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address:
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Residential Rooftop Solar PV 7.75 kW	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
CONTRACTOR	
Business name: Blue Raven Solar, LLC	
Address: 1403 North Research Way	
City/State/ZIP: Orem, UT 84097	
Phone: 385-482-0045	Fax:
E-mail: permitting.department@blueravensolar.com	CCB lic. no.: 210112
Electrical lic. no.: c1214	City or metro lic.: 5869S
Supervising electrician signature, required: <i>Samuel Collier</i>	
Print name: Samuel Collier	Date: 07/30/2019
Authorized signature: <i>Jeffrey Lee</i>	
Print name: Jeff Lee	Date: 07/30/2019

FEE SCHEDULE			
Number of Inspections per Item () Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)		81.14	
5.01 to 15 kva (2)	1	115.83	
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) (OAR 918-309-0070)		81.14	
FEE TOTALS			Recalculate
Subtotal			0.00
<< Check box if plan review is required			
<input type="checkbox"/> Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

Form B70-1005

REV 10/17

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00790**

Approval Code: 08792G 9/10/2019 7:09 am

E-mailed To: paul@timberlineelectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 9300 SW GEMINI DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Blamp Office	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127DB00201	
DESCRIPTION OF WORK	
Minor office remodel	
APPLICANT	
Name: Timberline Contractors	
Phone: 503-459-4089	Fax: 503-245-4227
Email:	
CONTRACTOR	
Elec lic. no.: 26-1211C	CCB lic. no.: 160037
Business Name: TIMBERLINE ELECTRICAL CONTRACTORS INC	
Contact:	
Address: PO BOX 918	
City/State/ZIP: LAKE OSWEGO, OR 97034	
Phone: 5034594089	Fax: 5032544227
Email: pat@timberlineelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	9	\$4.26	\$38.34
Electrical Permit Fees			
Subtotal			\$119.48
State surcharge (12% of permit total)			\$14.34
TOTAL PERMIT FEE			\$133.82

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Milkan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00789**

Approval Code: 027239 9/9/2019 6:57 pm

E-mailed To: donwilsue4@aol.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12124 SW WALDEN LN	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Redwood creek Apt	
Cross Street/directions to job site: Bld #7	
Tax map/parcel no.: 1S1270000208	
DESCRIPTION OF WORK	
New circuits for washer, dryer, micro hood all new devices and LED lighting. New Cadet heaters and T stats	
APPLICANT	
Name: Chris Riehle	
Phone: 5034770704	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C427	CCB lic. no.: 95163
Business Name: QUALITY PLUS FRAMING & ELECTRICAL INC	
Contact:	
Address: 16037 SW BOWMAN LN	
City/State/ZIP: SHERWOOD, OR 97140	
Phone: 5037991639	Fax:
Email: donwilsue4@aol.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	111	\$4.26	\$472.86
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	2	\$91.72	\$183.44
Electrical Permit Fees			
Subtotal			\$737.44
State surcharge (12% of permit total)			\$88.49
TOTAL PERMIT FEE			\$825.93

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00793**

Approval Code: 02294G 9/10/2019 2:14 pm

E-mailed To: Dreamhouseelectric@gmail.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 16019 SW WAXWING WAY	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Wolfe Residence	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132BB00600	
DESCRIPTION OF WORK	
3 bathrooms and laundry room updates	
APPLICANT	
Name: Christopher Mahoney	
Phone: 5035196711	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C848	CCB lic. no.: 196726
Business Name: DREAMHOUSE ELECTRIC LLC	
Contact:	
Address: 221 SW MOONRIDGE PL	
City/State/ZIP: PORTLAND, OR 97225	
Phone: 5035196711	Fax:
Email: Dreamhouseelectric@gmail.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$93.92
State surcharge (12% of permit total)			\$11.27
TOTAL PERMIT FEE			\$105.19

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00792**

Approval Code: 510194 9/10/2019 1:49 pm

E-mailed To: Kandice@nwsteele.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7677 SW CIRRUS DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 170910 32H	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122DD00300	
DESCRIPTION OF WORK	
Panel Change	
APPLICANT	
Name: Kandice Brown	
Phone: 5032681311	Fax: 5033726448
Email:	
CONTRACTOR	
Elec lic. no.: C489	CCB lic. no.: 186140
Business Name: STEELE ELECTRIC LLC	
Contact:	
Address: 716 Roxe Drive	
City/State/ZIP: FOREST GROVE, OR 97116	
Phone: 5032681311	Fax: 5033726448
Email: dan@nwsteele.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of Inspections Included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Electrical Permit Fees			
Subtotal			\$115.83
State surcharge (12% of permit total)			\$13.90
TOTAL PERMIT FEE			\$129.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Milikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00791**

Approval Code: 00350D 9/10/2019 1:13 pm

E-mailed To: office@falconelectricco.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 3737 SW 117TH AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 73	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S110CD00801	
DESCRIPTION OF WORK	
Electrical post was removed at time of fire, needs to be re-installed.	
APPLICANT	
Name: Scott Humphrey	
Phone: 5032084709	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C969	CCB lic. no.: 200111
Business Name: FALCON ELECTRIC INC	
Contact:	
Address: 10180 SW PARK WAY STE C	
City/State/ZIP: PORTLAND, OR 97225	
Phone: 5032084709	Fax:
Email: OFFICE@FALCONELECTRICCO.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Electrical Permit Fees			
Subtotal			\$115.83
State surcharge (12% of permit total)			\$13.90
TOTAL PERMIT FEE			\$129.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received:	Permit No. B2019-3799
Date Issued: 9/10/2019	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 14723 SW Teal Blvd
City/State/ZIP: Beaverton OR 97007	
Suite/bldg./apt. no.:	Project name: Insomnia/Kerner
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Relocate low-voltage thermostat wire.	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: Insomnia Coffee	
Address: 14723 SW Teal Blvd	
City/State/ZIP: Beaverton OR 97007	
Phone: (503) 539-8191	Fax:
E-mail: rbkerner@gmail.com	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Best Owner Direct HVAC	
Contact name: Chandrine Stepisnik	
Address: 800 S Oleander St	
City/State/ZIP: Cornelius OR 97113	
Phone: (971) 270-6520	Fax:
E-mail: bestownerdirect@yahoo.com	
CONTRACTOR	
Business name: Best Owner Direct HVAC	
Address: 800 S Oleander St	
City/State/ZIP: Cornelius OR 97113	
Phone: (503) 442-5964	Fax:
E-mail: bestownerdirect@yahoo.com	CCB lic. no.: 199049
Electrical lic. no.: 4419leb	City or metro lic.: 11365
Supervising electrician signature, required: [Signature]	
Print name: Kevin Stepisnik	Date: 09/06/19
Authorized signature: [Signature]	
Print name: Chandrine Stepisnik	Date: 09/06/19

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe: limited-energy thermostat wire moved.	1	91.72	91.72	2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			91.72	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			11.01	
TOTAL PERMIT FEE			\$102.73	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit

Form B70-1002

REV 10/17

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00772**

Approval Code: 514053 9/4/2019 1:35 pm

E-mailed To: peter@cepdx.com

B2019-3758

TYPE OF WORK

- ☐ New Construction ☒ Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- ☐ 1 or 2 family dwelling ☐ Multi-family ☒ Commercial ☐ Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 13955 SW MILLIKAN WAY

City/State/ZIP: BEAVERTON, OR 97005

Suite/bldg./apt.no.:

Project Name: C190660 - RFID Scanners

Cross Street/directions to job site:

Tax map/parcel no.: 1S109CD00200

DESCRIPTION OF WORK

Provide, install, terminate and test cat6e Nike network cable to 8 scanners.

APPLICANT

Name: Peter Bledsoe

Phone: 5032559488

Fax: 5032551966

Email:

CONTRACTOR

Elec lic. no.: 26-1054CLE

CCB lic. no.: 142457

Business Name: CAPITOL DATA & COMMUNICATIONS INC

Contact:

Address: 11401 NE MARX

City/State/ZIP: PORTLAND, OR 972201041

Phone: 5032559488

Fax: 5032551966

Email: RICHARDM@CPDX.COM

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4

Reconnect Only: 1

All Other Services: 2

PLAN REVIEW**Please check all that apply:**

- ☐ A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other
- ☐ Fire pumps
- ☐ Emergency systems
- ☐ Addition of a new motor load of 100 HP or more
- ☐ Six or more residential units in one structure
- ☐ Health care facilities
- ☐ Hazardous locations
- ☐ A service or feeder rated at 600 amps or more
- ☐ Buildings more than three stor
- ☐ Marinas and boat yards
- ☐ Floating buildings
- ☐ Commercial-use agricultural buildings
- ☐ Installation of a 150 KVA or larger separately derived sys
- ☐ "A", "E", or "I-2" or "I-3"
- ☐ Recreational Vehicle Parks
- ☐ Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE

Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Beaverton
OREGON

City Of Beaverton

12725 SW Millikan Way
Beaverton, OR 97076
Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00771

Approval Code: 514062 9/4/2019 1:26 pm

E-mailed To: Greg@CEPDX.COM

B2019-3754

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13955 SW MILLIKAN WAY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: C190665 - AZA ELECT ROOM	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S109CD00200	
DESCRIPTION OF WORK	
Provide, install, terminate and test complete ASG door package cable for electrical room access.	
APPLICANT	
Name: Greg Harmon	
Phone: 5032559488	Fax: 5032551966
Email:	
CONTRACTOR	
Elec lic. no.: 26-1054CLE	CCB lic. no.: 142457
Business Name: CAPITOL DATA & COMMUNICATIONS INC	
Contact:	
Address: 11401 NE MARX	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: RICHARDM@CPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**12726 SW Millikan Way
Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00777**

Approval Code: 815001 9/5/2019 4:10 pm

E-mailed To: hillaryp@cepdx.com

B2019-3707

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 11055 SW CANYON RD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Kohls Sign	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S110DC00302	
DESCRIPTION OF WORK	
Wire up new sign on the exterior of the building that is facing highway 217	
APPLICANT	
Name: Hillary Porter	
Phone: 5032559488	Fax: 5032551966
Email:	
CONTRACTOR	
Elec lic. no.: 26-496C	CCB lic. no.: 48748
Business Name: CAPITOL ELECTRIC CO INC	
Contact:	
Address: 11401 NE MARX ST	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: DARRELL@CEPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Milkan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00787**

Approval Code: 055670 9/9/2019 2:28 pm

E-mailed To: BUSINESSPERMITS@VIVINT.COM

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 17200 NW CORRIDOR CT	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.: 105	
Project Name: Burlingame PLace	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N130DC01100	
DESCRIPTION OF WORK	
Low Voltage Wireless Burglar Alarm Installation	
APPLICANT	
Name: Jeff Burlingame	
Phone: 5034865575	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: CLE216	CCB lic. no.: 173349
Business Name: VIVINT INC	
Contact:	
Address: 4931 N 300 W	
City/State/ZIP: PROVO, UT 84604	
Phone: 8002165232	Fax: 8017058082
Email: companylicensing@vivint.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Limited Energy			
Stand-alone limited energy, commercial	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Milikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00788**

Approval Code: 132144 9/9/2019 4:00 pm

E-mailed To: megan.glazner@aronsonsecurity.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 9300 SW NIMBUS AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: PDX16372 Vesta Security	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127DA00500	
DESCRIPTION OF WORK	
low voltage security - access control and intrusion for new tenant improvement project	
APPLICANT	
Name: Megan Glazner	
Phone: 5036705224	Fax: 5036844357
Email:	
CONTRACTOR	
Elec lic. no.: 26-497CLE	CCB lic. no.: 185024
Business Name: ARONSON SECURITY GROUP INC	
Contact:	
Address: 9350 SW NIBUS AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Phone: 5036399988	Fax: 5036844357
Email: ERIN.BUTRICO@ARONSON SECURITY.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Milikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00786**

Approval Code: 319065 9/9/2019 11:56 am

E-mailed To: kayla@jarmer.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 8225 SW APPLE WAY	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S113BC01000	
DESCRIPTION OF WORK	
CONNECT 2 HVAC SYSTEMS	
APPLICANT	
Name: Tim Jarmer	
Phone: 5032465381	Fax: 5032448037
Email:	
CONTRACTOR	
Elec lic. no.: 26-144C	CCB lic. no.: 6924
Business Name: JARMER ELECTRIC INC	
Contact:	
Address: 5105 SW 45TH AVE #200	
City/State/ZIP: PORTLAND, OR 97221	
Phone: 5032465381	Fax: 5032448037
Email: SUEK@JARMER.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$93.92
State surcharge (12% of permit total)			\$11.27
TOTAL PERMIT FEE			\$105.19

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Milikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00785**

Approval Code: 021314 9/9/2019 11:13 am

E-mailed To: nuon@pacnetworks.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12655 SW CENTER ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 350	
Project Name: Adept PDX Construction Inc.	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S109DD01800	
DESCRIPTION OF WORK	
Low voltage Data cabling for Adept PDX.	
APPLICANT	
Name: Nuon Suon	
Phone: 503-358-6866	Fax: 503-352-0202
Email:	
CONTRACTOR	
Elec lic. no.: CLE568	CCB lic. no.: 184982
Business Name: PACIFIC NETWORKS INC	
Contact:	
Address: 16869 SW 65TH AVE STE 373	
City/State/ZIP: LAKE OSWEGO, OR 97035	
Phone: 5036454000	Fax:
Email: nuon@pacnetworks.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00784**

Approval Code: 119005 9/9/2019 9:50 am

E-mailed To: hillaryp@cepdx.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 4050 SW 139TH WAY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Audi CW Outlet	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116BA00600	
DESCRIPTION OF WORK	
Relocate outlet as directed	
APPLICANT	
Name: Capitol Electric	
Phone: 5032559488	Fax: 5032577121
Email:	
CONTRACTOR	
Elec lic. no.: 26-496C	CCB lic. no.: 48748
Business Name: CAPITOL ELECTRIC CO INC	
Contact:	
Address: 11401 NE MARX ST	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: DARRELL@CEPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**12725 SW Millikan Way
Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00770**

Approval Code: 064346 9/4/2019 11:16 am

E-mailed To: dorear@globalelectricusa.com

B2019-3752

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 910 NW 176TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: Engel Sunroom	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131CA04400	
DESCRIPTION OF WORK	
Extending (2) Branch Circuits For Sun room. Corresponding building permit is B2019-2862	
APPLICANT	
Name: Dustin O'Rear	
Phone: 5036806890	Fax: 5036475649
Email:	
CONTRACTOR	
Elec lic. no.: 34-655C	CCB lic. no.: 156838
Business Name: GLOBAL ELECTRIC INC	
Contact:	
Address: PO BOX 162	
City/State/ZIP: NORTH PLAINS, OR 97133	
Phone: 5036475650	Fax: 5036475649
Email: globalelectric@globalelectricusa.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities		<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 9/15/19	Permit No.: B2019-2011
Date Issued:	By: <i>clery</i>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 8625 SW Cascade Sq. Ave.
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.: 506	Project name: Cascade Sq. Suite 506
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Connecting thermostats.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Same as Below	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Willamette HVAC, LLC	
Address: 3075 SE Century Blvd. Suite 206	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 259-3200	Fax: (503) 848-2597
E-mail: mmaalstrom@willamettehvac.com	CCB lic. no.: 56951
Electrical lic. no.: 34-346CRE	City or metro lic.: 7433
Supervising electrician signature, required: <i>Mike Sicard</i>	
Print name: Mike Sicard	Date: 08/19/19
Authorized signature: <i>Michael Malstrom</i>	
Print name: Michael Malstrom	Date: 08/19/19

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14	81.14	2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:	1	91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			81.14	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			9.74	
TOTAL PERMIT FEE			\$90.88	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
* Number of inspections allowed per permit.
Form B70-1002 REV 10/17

102-73



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received:	Permit No.: B2019-37458
Date Issued: 9/5/19	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 8625 SW Cascade Sq. Ave.
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.: 500	Project name: Cascade Sq. Suite 500
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Connecting/reconnecting thermostats.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Same as Below	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Willamette HVAC, LLC	
Address: 3075 SE Century Blvd. Suite 206	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 259-3200	Fax: (503) 848-2597
E-mail: mmalstrom@willamettehvac.com	CCB lic. no.: 56951
Electrical lic. no.: 34-346CRE	City or metro lic.: 7433
Supervising electrician signature, required: [Signature]	
Print name: Mike Sicard	Date: 08/20/19
Authorized signature: [Signature]	
Print name: Michael Malstrom	Date: 08/20/19

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:	1	91.72	91.72	2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			91.72	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			11.01	
TOTAL PERMIT FEE			\$102.73	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.

Form B70-1002

REV 10/17

**City Of Beaverton**

12725 SW Milikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00776**

Approval Code: 005125 9/5/2019 3:50 pm

E-mailed To: precisionnwelectrical@yahoo.com

TYPE OF WORK☐ New Construction ☒ Addition/alteration/replacement**CATEGORY OF CONSTRUCTION**☒ 1 or 2 family dwelling ☐ Multi-family ☐ Commercial ☐ Accessory**JOB SITE INFORMATION AND LOCATION**

Job Address: 10 SW WALLINGFORD WAY

City/State/ZIP: BEAVERTON, OR 97006

Suite/bldg./apt.no.:

Project Name: AKB/ Broyles

Cross Street/directions to job site:

Tax map/parcel no.: 1S106AA11300

DESCRIPTION OF WORK

6- circuit kitchen remodel

APPLICANT

Name: Kevin Riggs

Phone: 503-880-2754

Fax: 503-594-2873

Email:

CONTRACTOR

Elec lic. no.: C47

CCB lic. no.: 163318

Business Name: PRECISION NW ELECTRICAL CONTRACTORS LLC

Contact:

Address: 14842 SE REGNER TERRACE

City/State/ZIP: BORING, OR 97009

Phone: 5038802754

Fax: 5036581615

Email: PRECISIONNWELECTRICAL@YAHOO.COM

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4

Reconnect Only: 1

All Other Services: 2

PLAN REVIEW

Please check all that apply:

☐ A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other☐ Fire pumps☐ Emergency systems☐ Addition of a new motor load of 100 HP or more☐ Six or more residential units in one structure☐ Health care facilities☐ Hazardous locations☐ A service or feeder rated at 600 amps or more☐ Buildings more than three stor☐ Marinas and boat yards☐ Floating buildings☐ Commercial-use agricultural buildings☐ Installation of a 150 KVA or larger separately derived sys☐ "A", "E", or "I-2" or "I-3"☐ Recreational Vehicle Parks☐ Supply voltage for more than 600 supply volts nominal**FEE SCHEDULE**

Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	5	\$4.26	\$21.30
Electrical Permit Fees			
Subtotal			\$102.44
State surcharge (12% of permit total)			\$12.29
TOTAL PERMIT FEE			\$114.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**12725 SW Millikan Way
Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00775**

Approval Code: 715050 9/5/2019 3:05 pm

E-mailed To: dave@westernsuperiorelectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 10370 SW SHEARWATER LOOP	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Suburban	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132BA02500	
DESCRIPTION OF WORK	
Add cans at patio and outlets	
APPLICANT	
Name: david quintana	
Phone: 5038056873	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C802	CCB lic. no.: 191702
Business Name: WESTERN SUPERIOR ELECTRIC LLC	
Contact:	
Address: 21355 SOUTH GREEN MOUNTAIN ROAD	
City/State/ZIP: COLTON, OR 97017	
Phone: 5038056873	Fax:
Email: WESTERNSUPERIORelectric@GMAIL.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**12725 SW Millikan Way
Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00774**

Approval Code: 517510 9/5/2019 7:00 am

E-mailed To: phelectricllc@gmail.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13385 SW CARR ST	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Moore	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128AB01400	
DESCRIPTION OF WORK	
convert electric furnace to gas, new GFCI circuit	
APPLICANT	
Name: Rodney Loder	
Phone: 5035519611	Fax: 5033759829
Email:	
CONTRACTOR	
Elec lic. no.: C761	CCB lic. no.: 192114
Business Name: PHOTO ELECTRIC LLC	
Contact:	
Address: PO BOX 13657	
City/State/ZIP: SALEM, OR 97309	
Phone: 5035519611	Fax: 5033759829
Email: phelectricllc@gmail.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00781**

Approval Code: 006425 9/6/2019 8:13 am

E-mailed To: info@pdxelectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7270 SW SYLVAN CT	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S101DC03000	
DESCRIPTION OF WORK	
Panel	
APPLICANT	
Name: Kelly Palmer	
Phone: 5036399708	Fax: 5032001362
Email:	
CONTRACTOR	
Elec lic. no.: C696	CCB lic. no.: 192731
Business Name: PDX ELECTRIC LLC	
Contact:	
Address: 15816 SW UPPER BOONES FERRY RD	
City/State/ZIP: LAKE OSWEGO, OR 97035	
Phone: 5036399708	Fax: 503-200-1362
Email: INFO@PDXELECTRIC.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Electrical Permit Fees			
Subtotal			\$115.83
State surcharge (12% of permit total)			\$13.90
TOTAL PERMIT FEE			\$129.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**12725 SW Milikan Way
Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00780**

Approval Code: 04643G 9/6/2019 7:21 am

E-mailed To: teslapdx@gmail.com

TYPE OF WORK☐ New Construction ☒ Addition/alteration/replacement**CATEGORY OF CONSTRUCTION**☒ 1 or 2 family dwelling ☐ Multi-family ☐ Commercial ☐ Accessory**JOB SITE INFORMATION AND LOCATION**

Job Address: 6695 SW GRIFFIN DR

City/State/ZIP: BEAVERTON, OR 97223

Suite/bldg./apt.no.:

Project Name:

Cross Street/directions to job site:

Tax map/parcel no.: 1S124AA02200

DESCRIPTION OF WORK

Rough in for new kitchen

APPLICANT

Name: Igor Zelen

Phone: 503-724-1175

Fax: 503-646-3498

Email:

CONTRACTOR

Elec lic. no.: C599

CCB lic. no.: 189699

Business Name: TESLA ELECTRIC COMPANY INC

Contact:

Address: 2850 SW CEDAR HILLS BLVD #250

City/State/ZIP: BEAVERTON, OR 97005

Phone: 5037241175

Fax: 5036463498

Email: teslapdx@gmail.com

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4

Reconnect Only: 1

All Other Services: 2

PLAN REVIEW

Please check all that apply:

☐ A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other☐ Fire pumps☐ Emergency systems☐ Addition of a new motor load of 100 HP or more☐ Six or more residential units in one structure☐ Health care facilities☐ Hazardous locations☐ A service or feeder rated at 600 amps or more☐ Buildings more than three stor☐ Marinas and boat yards☐ Floating buildings☐ Commercial-use agricultural buildings☐ Installation of a 150 KVA or larger separately derived sys☐ "A", "E", or "I-2" or "I-3"☐ Recreational Vehicle Parks☐ Supply voltage for more than 600 supply volts nominal**FEE SCHEDULE**

Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$93.92
State surcharge (12% of permit total)			\$11.27
TOTAL PERMIT FEE			\$105.19

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Beaverton
OREGON

City Of Beaverton

12725 SW Millikan Way
Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00778

Approval Code: 04611G 9/5/2019 8:45 pm

E-mailed To: T Fryman126@gmail.com

TYPE OF WORK

☐ New Construction ☒ Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

☐ 1 or 2 family dwelling ☐ Multi-family ☒ Commercial ☐ Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 13515 SW MILLIKAN WAY

City/State/ZIP: BEAVERTON, OR 97005

Suite/bldg./apt.no.:

Project Name:

Cross Street/directions to job site:

Tax map/parcel no.: 1S109CD00100

DESCRIPTION OF WORK

Demo out old offices and receptacles, replacing full size walls with pony walls and adding receptacles in those walls. Adding 10 circuits for receptacles in pony walls and possibly lighting circuits since everything comes from the panel that's in the resale store

APPLICANT

Name: Tyler Fryman

Phone: 5037588066

Fax:

Email:

CONTRACTOR

Elec lic. no.: C1322

CCB lic. no.: 217834

Business Name: GREEN TREE ELECTRIC LLC

Contact:

Address: 902 S PINE ST

City/State/ZIP: CANBY, OR 97013

Phone: 5037588066

Fax:

Email: tfryman126@gmail.com

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4

Reconnect Only: 1

All Other Services: 2

PLAN REVIEW

Please check all that apply:

☐ A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other

☐ Fire pumps

☐ Emergency systems

☐ Addition of a new motor load of 100 HP or more

☐ Six or more residential units in one structure

☐ Health care facilities

☐ Hazardous locations

☐ A service or feeder rated at 600 amps or more

☐ Buildings more than three stor

☐ Marinas and boat yards

☐ Floating buildings

☐ Commercial-use agricultural buildings

☐ Installation of a 150 KVA or larger separately derived sys

☐ "A", "E", or "I-2" or "I-3"

☐ Recreational Vehicle Parks

☐ Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE

Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	9	\$4.26	\$38.34
Electrical Permit Fees			
Subtotal			\$119.48
State surcharge (12% of permit total)			\$14.34
TOTAL PERMIT FEE			\$133.82

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**12725 SW Milikan Way
Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00783**

Approval Code: 05886G 9/6/2019 10:16 am

E-mailed To: office@ericolsonelectricinc.com

TYPE OF WORK☐ New Construction ☒ Addition/alteration/replacement**CATEGORY OF CONSTRUCTION**☒ 1 or 2 family dwelling ☐ Multi-family ☐ Commercial ☐ Accessory**JOB SITE INFORMATION AND LOCATION**

Job Address: 13540 SW HITEON LN

City/State/ZIP: BEAVERTON, OR 97008

Suite/bldg./apt.no.:

Project Name: 19-2227

Cross Street/directions to job site:

Tax map/parcel no.: 1S133BA05700

DESCRIPTION OF WORK

(2) gas furnace & (2) Ac reconnects

APPLICANT

Name: tom stanton

Phone: 9712353316

Fax:

Email:

CONTRACTOR

Elec lic. no.: 37-1053C

CCB lic. no.: 179408

Business Name: ERIC OLSON ELECTRIC INC

Contact:

Address: 10013 NE HAZEL DELL AVE PMB#432

City/State/ZIP: VANCOUVER, WA 98685

Phone: 3602581849

Fax: 3602581859

Email: office@ericolsonelectricinc.com

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4

Reconnect Only: 1

All Other Services: 2

PLAN REVIEW**Please check all that apply:**☐ A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other☐ Fire pumps☐ Emergency systems☐ Addition of a new motor load of 100 HP or more☐ Six or more residential units in one structure☐ Health care facilities☐ Hazardous locations☐ A service or feeder rated at 600 amps or more☐ Buildings more than three stor☐ Marinas and boat yards☐ Floating buildings☐ Commercial-use agricultural buildings☐ Installation of a 150 KVA or larger seperately derived sys☐ "A", "E", or "I-2" or "I-3"☐ Recreational Vehicle Parks☐ Supply voltage for more than 600 supply volts nominal**FEE SCHEDULE**

Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$93.92
State surcharge (12% of permit total)			\$11.27
TOTAL PERMIT FEE			\$105.19

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00782**

Approval Code: 05094G 9/6/2019 8:45 am

E-mailed To: cowlesrt@frontier.com

TYPE OF WORK☐ New Construction ☒ Addition/alteration/replacement**CATEGORY OF CONSTRUCTION**☐ 1 or 2 family dwelling ☐ Multi-family ☒ Commercial ☐ Accessory**JOB SITE INFORMATION AND LOCATION**

Job Address: 12725 SW MILLIKAN WAY

City/State/ZIP: BEAVERTON, OR 97005

Suite/bldg./apt.no.: 220

Project Name: suite 200 break room

Cross Street/directions to job site:

Tax map/parcel no.: 1S116AA08700

DESCRIPTION OF WORK

electrical work is in new suite 200 addition of 2 circuits for a dishwasher and counter outlets in break-room area and extension of the existing circuit for for outlet.

APPLICANT

Name: Richard Cowles

Phone: 5033572200

Fax: 5033572212

Email:

CONTRACTOR

Elec lic. no.: 34-572C

CCB lic. no.: 159395

Business Name: OES LLC

Contact:

Address: 1820 POPLAR ST

City/State/ZIP: FOREST GROVE, OR 97116

Phone: 5033572200

Fax: 5033572212

Email: cowlesrt@frontier.com

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4

Reconnect Only: 1

All Other Services: 2

PLAN REVIEW

Please check all that apply:

☐ A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other☐ Fire pumps☐ Emergency systems☐ Addition of a new motor load of 100 HP or more☐ Six or more residential units in one structure☐ Health care facilities☐ Hazardous locations☐ A service or feeder rated at 600 amps or more☐ Buildings more than three stor☐ Marinas and boat yards☐ Floating buildings☐ Commercial-use agricultural buildings☐ Installation of a 150 KVA or larger separately derived sys☐ "A", "E", or "I-2" or "I-3"☐ Recreational Vehicle Parks☐ Supply voltage for more than 600 supply volts nominal**FEE SCHEDULE**

Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	2	\$4.26	\$8.52
Electrical Permit Fees			
Subtotal			\$89.66
State surcharge (12% of permit total)			\$10.76
TOTAL PERMIT FEE			\$100.42

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received:	Permit No.:
Date Issued:	By:
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 1192 NW Weybridge Way
City/State/ZIP: Beaverton OR 97006	
Suite/bldg./apt. no.:	Project name: Balcony enclosure
Cross street/directions to job site: 173rd Ave	
Subdivision: Winthrop Park No 2	Lot no.: 72
Tax map/parcel no.: 1N131AC-12600	
DESCRIPTION OF WORK	
Add 3 additional outlets to existing GFI circuit in room.	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Bruce Rupprecht	
Address: 1192 NW Weybridge Way	
City/State/ZIP: Beaverton Or 97006	
Phone: (503) 998-5439	Fax:
E-mail: brucerpdx@gmail.com	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date: 09/03/19
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: Property Owner - see above	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: property owner - see above	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	Date: 9/9/19
Print name: BRUCE RUPPRECHT	Date: 9/9/19

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings	
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks	
<input type="checkbox"/> Six or more residential units			
<input type="checkbox"/> Health-care facilities			
<input type="checkbox"/> Hazardous locations			
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit includes attached garage			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14	2
Each add'l branch circuit		4.26	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting		91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
Each additional inspection over allowable in any of the above			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.
Form B70-1002

REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

RECEIVED

OFFICE USE ONLY

Date Received: 09/05/2019	Permit No.: B2019-3756
Date Issued: 9-5-19	By: <i>[Signature]</i>
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: <i>Visa</i>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 9300 SW Gemini Dr.
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: BiAmp
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Fire Alarm and Phone/Data	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: BiAmp	
Address: 9300 SW Gemini Dr.	
City/State/ZIP: Beaverton, OR 97008	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Point Monitor Corp.	
Contact name: Brooke Williams	
Address: 5863 Lakeview Blvd #100	
City/State/ZIP: Lake Oswego, OR 97035	
Phone: (503) 627-0100	Fax:
E-mail: bwilliams@pointmonitor.com	
CONTRACTOR	
Business name: Point Monitor Corp.	
Address: 5863 Lakeview Blvd #100	
City/State/ZIP: Lake Oswego, OR 97035	
Phone: (503) 627-0100	Fax:
E-mail: bwilliams@pointmonitor.com	CCB lic. no.: 135901
Electrical lic. no.: 34-508CLE	City or metro lic.:
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: Ben Breit	Date: 09/05/19
Authorized signature: <i>[Signature]</i>	
Print name: Ben Breit	Date: 09/05/19

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:	2	91.72	183.44	2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			183.44	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			22.01	
TOTAL PERMIT FEE			\$205.45	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
* Number of inspections allowed per permit.
Form B70-1002 REV 10/17

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00766**

Approval Code: 16027G 9/2/2019 5:38 pm

E-mailed To: GenesisElectricNW@Gmail.com

B2019-3731

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15875 SW BOBWHITE CIR	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Gary - Bobwhite	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132DB06600	
DESCRIPTION OF WORK	
Bath remodel, R&R fan, move outlets and switches	
APPLICANT	
Name: KEITH CIMINSKI	
Phone: 5033038056	Fax: 5033038605
Email:	
CONTRACTOR	
Elec lic. no.: C692	CCB lic. no.: 192658
Business Name: GENESIS ELECTRIC NW LLC	
Contact:	
Address: 16379 TRAIL VIEW DR	
City/State/ZIP: OREGON CITY, OR 97045	
Phone: 5033038056	Fax: 5033038605
Email: GENESISELECTRICNW@GMAIL.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	2	\$4.26	\$8.52
Electrical Permit Fees			
Subtotal			\$89.66
State surcharge (12% of permit total)			\$10.76
TOTAL PERMIT FEE			\$100.42

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Milkan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00767**

Approval Code: 050971 9/3/2019 6:30 am

E-mailed To: laurel.semprevivogonzalez@oeg.us.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15455 NW GREENBRIER PKWY	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: 707837-104 Greenbrier	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N132CA00500	
DESCRIPTION OF WORK	
Install wall-mount TV in suite 260	
APPLICANT	
Name: Paul Hobbs	
Phone: 5037937537	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-95C	CCB lic. no.: 203
Business Name: OEG INC	
Contact:	
Address: 1709 SE 3RD AVE	
City/State/ZIP: PORTLAND, OR 97214	
Phone: 5032349900	Fax: 5032341001
Email: webaccounting@oregon-electric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00768**

Approval Code: 672998 9/3/2019 11:37 am

E-mailed To: Andrew@squireselectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 8575 SW BIRCHWOOD RD	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: 8575 SW Birchwood	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S111DD01500	
DESCRIPTION OF WORK	
2 ckts, BBQ and hot tub power	
APPLICANT	
Name: Andrew Cohen	
Phone: 5032521609	Fax: 5032535831
Email:	
CONTRACTOR	
Elec lic. no.: 26-1101C	CCB lic. no.: 135085
Business Name: SQUIRES ELECTRIC INC	
Contact:	
Address: 2203 NE MARTIN LUTHER KING JR BLVD	
City/State/ZIP: PORTLAND, OR 97212	
Phone: 5032521609	Fax: 5032535831
Email: office@squireselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations		
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more		
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor		
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards		
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings		
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings		
	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys		
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"		
	<input type="checkbox"/> Recreational Vehicle Parks		
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00769**

Approval Code: 025897 9/3/2019 2:12 pm

E-mailed To: kevin@ticeelectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 17235 NW CORRIDOR CT	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.: 150	
Project Name: Laser Tag	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N130DC00700	
DESCRIPTION OF WORK	
Add new surface mounted fixtures, receptacles for laser tag, exhaust fan.	
APPLICANT	
Name: Anna McCall	
Phone: 9712803906	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-126C	CCB lic. no.: 166
Business Name: TICE ELECTRIC COMPANY	
Contact:	
Address: 5405 N LAGOON AVE	
City/State/ZIP: PORTLAND, OR 97217	
Phone: 5038728256	Fax: 9712303330
Email: sarac@ticeelec.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> A service or feeder rated at 600 amps or more	
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Marinas and boat yards	<input type="checkbox"/> Floating buildings	
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks	
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal		
<input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	7	\$4.26	\$29.82
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$202.68
State surcharge (12% of permit total)			\$24.32
TOTAL PERMIT FEE			\$227.00

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Renewable Electrical Energy Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222

BeavertonOregon.gov

OFFICE USE ONLY

Date Received:

Permit No.: B2019-3726

Date Issued: 9-3-19

By: MK

Payment Type: VISA

TYPE OF WORK

☐ New construction

☒ Addition/alteration/replacement

☒ Other: Solar

CATEGORY OF CONSTRUCTION

☒ 1- and 2-family dwelling

☐ Commercial/Industrial

☐ Accessory building

☐ Multi-family

☐ Other:

JOB SITE INFORMATION AND LOCATION

Job no.:

Job address: 13550 SW 22nd St

City/State/ZIP:

Beaverton, OR 97008

Suite/bldg./apt. no.:

Project name: BOSCH

Cross street/directions to job site:

Subdivision:

Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK

SOLAR PV INSTALLATION
6.0 kW

☒ PROPERTY OWNER

☐ TENANT

Name:

Gosch, Jon

Address:

13550 SW 22nd St

City/State/ZIP:

Beaverton, OR 97008

Phone:

503-688-8065

Fax:

E-mail:

Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.

Owner signature:

Date:

CONTRACTOR

Business name:

PROSTAT ELECTRIC

Address:

1721 NE 64th Ave

City/State/ZIP:

Vancouver, WA 98661

Phone:

503-539-7772

Fax:

E-mail:

dale.krueger@comcast.net

CCB lic. no.:

188902

Electrical lic. no.:

C597

City or metro lic.:

Supervising electrician signature, required:

Dale Krueger

Print name:

Dale Krueger

Date:

8/19/19

Authorized signature:

Dale Krueger

Print name:

Dale Krueger

Date:

8/19/19

FEE SCHEDULE

Number of inspections per item (1) Renewable energy installation per system total	No. of items	Cost Each	Total
5 kva or less (2)		81.14	
5.01 to 15 kva (2)	1	115.83	115.83
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) (OAR 918-309-0070)		81.14	

FEE TOTALS

Recalculated

Subtotal	0.00
<input type="checkbox"/> Check box if plan review is required Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)	
State surcharge (12% of permit fee)	0.00
TOTAL PERMIT FEE	\$129.73

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

Form B70-1005

REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222

BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 9-3-19

Permit No.: 32019-3723

Date Issued: 9-3-19

By: MK

Payment Type: Visa

TYPE OF WORK

- ☐ New construction ☒ Addition/alteration/replacement
☐ Other:

CATEGORY OF CONSTRUCTION

- ☒ 1- and 2-family dwelling ☐ Commercial/industrial ☐ Accessory building
☐ Multi-family ☐ Master builder ☐ Other:

JOB SITE INFORMATION AND LOCATION

Job no.: Job address: 15606 SW Wren Lane

City/State/ZIP: Beaverton, Or. 97007

Suite/bldg./apt. no.: Project name: wet bar addition

Cross street/directions to job site: SW 155 th. Terrance & Scholls Ferry Rd.

Subdivision: Westmont Lot no.: 7

Tax map/parcel no.: 2018 007864

DESCRIPTION OF WORK

20 Amp line add breaker box to fam. room wet bar location. see wet bar tif file.

☒ PROPERTY OWNER

☐ TENANT

Name: David Accornero

Address: 15606 SW Wren Lane

City/State/ZIP: Beaverton, Or. 97007

Phone: (541) 410-7493

Fax:

E-mail: accornerodave709@gmail.com

Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.

Owner signature: Date:

☒ APPLICANT

☐ CONTACT PERSON

Business name:

Contact name: David Accornero

Address: 15606 SW Wren Lane

City/State/ZIP: Beaverton, Or. 97007

Phone: (541) 410-7493

Fax:

E-mail: accornerodave709@gmail.com

CONTRACTOR

Business name: Homeowner

Address:

City/State/ZIP:

Phone:

Fax:

E-mail:

CCB lic. no.:

Electrical lic. no.:

City or metro lic.:

Supervising electrician signature, required:

Print name:

Date:

Authorized signature:

Print name:

Date:

PLAN REVIEW

Please check all that apply:

- ☐ Service or feeder 400amps or more
☐ Fire pump
☐ Emergency system
☐ Addition of new motor load of 100HP or more
☐ Six or more residential units
☐ Health-care facilities
☐ Hazardous locations

- ☐ Service or feeder over 600 amps
☐ Building over three stories
☐ Marinas and boatyards
☐ Floating buildings
☐ Commercial-use agricultural buildings
☐ Installation of 150 KVA or larger separately derived system
☐ "A," "E," "I-2," "I-3" occupancy
☐ Recreational vehicle parks

FEE SCHEDULE

Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				0.00
TOTAL PERMIT FEE				\$90.88

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.

Form B70-1002

REV 10/17



Renewable Electrical Energy Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 09/03/2019 Permit No. B2019-3721

Date Issued: 9/13/2019

CITY OF BEAVERTON
BUILDING DIVISION

Payment Type:

TYPE OF WORK

- ☐ New construction ☐ Addition/alteration/replacement
☒ Other: Solar PV

CATEGORY OF CONSTRUCTION

- ☐ 1- and 2-family dwelling ☐ Commercial/Industrial ☐ Accessory building
☐ Multi-family ☐ Other:

JOB SITE INFORMATION AND LOCATION

Job no.: Job address:

City/State/ZIP:

Suite/bldg./apt. no.: Project name:

Cross street/directions to job site:

Subdivision: Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK

Residential Rooftop Solar PV 6.51 kW

☐ PROPERTY OWNER

☐ TENANT

Name:

Address:

City/State/ZIP:

Phone: Fax:

E-mail:

Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.

Owner signature: Date:

CONTRACTOR

Business name: Blue Raven Solar, LLC

Address: 1403 North Research Way

City/State/ZIP: Orem, UT 84097

Phone: 385-482-0045 Fax:

E-mail: permitting.department@blueravensolar.com CCB lic. no.: 210112

Electrical lic. no.: c1214 City or metro lic.: 5869S

Supervising electrician signature, required: Samuel Collier

Print name: Samuel Collier Date: 08/20/2019

Authorized signature: Jeff Lee

Print name: Jeff Lee Date: 08/20/2019

FEE SCHEDULE

Number of inspections per item () Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)		81.14	
5.01 to 15 kva (2)	1	115.83	
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) (OAR 918-309-0070)		81.14	

FEE TOTALS

Recalculate

<< Check box if plan review is required	Subtotal	0.00
<input type="checkbox"/> Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)		
State surcharge (12% of permit fee)		0.00
TOTAL PERMIT FEE		\$0.00

This permit application expires if a permit is not obtained within
180 days after it has been accepted as complete

Form 870-1005

REV 10/17

\$129.73



Beaverton
OREGON

City Of Beaverton

12726 SW Millikan Way
Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00773

B2019-3763 Approval Code: 767181 9/4/2019 3:27 pm

E-mailed To: suzi.flowers@christenson.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 8770 SW NIMBUS AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.: B	
Project Name: JOB 24279 IXIA KEYSIGHT DUAL BOLLARD	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127AD00500	
DESCRIPTION OF WORK	
3 CKTS FOR NEW TRANSFORMER	
APPLICANT	
Name: SUZI FLOWERS	
Phone: 5034193344	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-34C	CCB lic. no.: 458
Business Name: CHRISTENSON ELECTRIC INC	
Contact:	
Address: 17201 NE SACRAMENTO ST	
City/State/ZIP: PORTLAND, OR 97230	
Phone: 5034193300	Fax: 5034193333
Email: marijo.beckman@christenson.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations		
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more		
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor		
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards		
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings		
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings		
	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys		
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"		
	<input type="checkbox"/> Recreational Vehicle Parks		
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$128.61
State surcharge (12% of permit total)			\$15.43
TOTAL PERMIT FEE			\$144.04

Upon review and approval by your local Jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received:	Permit No. 132019-3923
Date Issued: 9/10/2019	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: 1905590	Job address:
City/State/ZIP: Beaverton, OR 97006	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: SW Jenkins Rd & SW Jay St	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Traffic Signal and Street light Work On SE Side Of Sw Jenkins & SW Jay St	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Global Electric, Inc.	
Contact name: Dustin O'Rear	
Address: PO Box 162	
City/State/ZIP: North Plains OR 97133	
Phone: (503) 647-5650	Fax: (503) 647-5649
E-mail: dispatch@globalelectricusa.com	
CONTRACTOR	
Business name: Global Electric, Inc.	
Address: PO Box 162	
City/State/ZIP: North Plains OR 97133	
Phone: (503) 647-5650	Fax: (503) 647-5649
E-mail: dispatch@globalelectricusa.com	CCB lic no.: 156838
Electrical lic. no.: 34-655C	City or metro lic.: 7747
Supervising electrician signature, required: [Signature]	
Print name: Justin Spiering	Date: 9/17/19
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Hazardous locations			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	115.83	115.83	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits – new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit	6	4.26	25.56	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			141.39	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			16.97	
TOTAL PERMIT FEE			\$158.36	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.

Form 870-1002

REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received:

Date Issued:

Permit No:

By:

Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: 1905590	Job address:
City/State/ZIP: Beaverton, OR 97006	
Suite/bldg./apt. no.	Project name:
Cross street/directions to job site: SW Jenkins Rd & Nike World Campus	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Traffic Signal and Street light Work On SE Side Of Sw Jenkins & Nike World Campus	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Global Electric, Inc.	
Contact name: Dustin O'Rear	
Address: PO Box 162	
City/State/ZIP: North Plains OR 97133	
Phone: (503) 647-5650	Fax: (503) 647-5649
E-mail: dispatch@globalelectricusa.com	
CONTRACTOR	
Business name: Global Electric, Inc.	
Address: PO Box 162	
City/State/ZIP: North Plains OR 97133	
Phone: (503) 647-5650	Fax: (503) 647-5649
E-mail: dispatch@globalelectricusa.com	CCB lic. no.: 156838
Electrical lic. no.: 34-655C	City or metro lic.: 7747
Supervising electrician signature, required: <i>Justin Spiering</i>	
Print name: Justin Spiering	Date: 9/17/19
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps	<input type="checkbox"/> Building over three stories		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Floating buildings		
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Commercial-use agricultural buildings		
		<input type="checkbox"/> Installation of 150 KVA or larger separately derived system		
		<input type="checkbox"/> "A""E""I-2""I-3" occupancy		
		<input type="checkbox"/> Recreational vehicle parks		
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	115.83	115.83	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits -- new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit	6	4.26	25.56	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe.		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			141.39	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			16.97	
TOTAL PERMIT FEE			\$158.36	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit

Form 870-1002

REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received:	9/18/2019	Permit No.:	182019-3121
Date Issued:		By:	
		Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: 1905590	Job address:
City/State/ZIP: Beaverton, OR 97006	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: SW Jenkins Rd & Sw Murray Blvd	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Traffic Signal and Street light Work On SW Corner Of Sw Jenkins & Sw Murray Blvd	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Global Electric, Inc.	
Contact name: Dustin O'Rear	
Address: PO Box 162	
City/State/ZIP: North Plains OR 97133	
Phone: (503) 647-5650	Fax: (503) 647-5649
E-mail: dispatch@globalelectricusa.com	
CONTRACTOR	
Business name: Global Electric, Inc.	
Address: PO Box 162	
City/State/ZIP: North Plains OR 97133	
Phone: (503) 647-5650	Fax: (503) 647-5649
E-mail: dispatch@globalelectricusa.com	CCB lic. no.: 156838
Electrical lic. no.: 34-655C	City or metro lic.: 7747
Supervising electrician signature, required: <i>Justin Spiering</i>	
Print name: Justin Spiering	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW

Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings	
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Recreational vehicle parks	
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Hazardous locations		
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit			
Includes attached garage			
1,000 sq. ft. or less		194.64	4
Each add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less	1	115.83	115.83
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit	6	4.26	25.56
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14	2
Each add'l branch circuit		4.26	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting		91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
Each additional inspection over allowable in any of the above			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			141.39
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			16.97
TOTAL PERMIT FEE			\$158.36

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
* Number of inspections allowed per permit.
Form 870-1002 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received:	Permit No. B2019-3917
Date Issued: 9/17/2019	SM
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 208, SW 105th Ter
City/State/ZIP: PORTLAND, OR, 97225	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<input checked="" type="checkbox"/> PROPERTY OWNER	
<input type="checkbox"/> TENANT	
Name: SATISH SURAPANENI	
Address:	
City/State/ZIP:	
Phone: 774-275-0919	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: Satish Date: 09/18/2019	
<input type="checkbox"/> APPLICANT	
<input type="checkbox"/> CONTACT PERSON	
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Same as owner	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit	1	81.14		2
Each add'l branch circuit	4	4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				0.00
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				0.00
TOTAL PERMIT FEE				\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
* Number of inspections allowed per permit.
Form B70-1002 REV 10/17

109.96

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00810**

Approval Code: 190662 9/17/2019 3:06 pm

E-mailed To: ADMIN@LANGSTONEELECTRIC.COM

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6017 SW HEIGHTS LN	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S117CD16000	
DESCRIPTION OF WORK	
ADDING NEW CIRCUITS	
APPLICANT	
Name: Paul Langston	
Phone: 9712945403	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1381	CCB lic. no.: 221266
Business Name: LANGSTON ELECTRIC LLC	
Contact:	
Address: PO BOX 2363	
City/State/ZIP: BEAVERTON, OR 97075	
Phone: 9712945403	Fax:
Email: ADMIN@LANGSTONEELECTRIC.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> A service or feeder rated at 600 amps or more	
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Marinas and boat yards	<input type="checkbox"/> Floating buildings	
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks	
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal		
<input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$93.92
State surcharge (12% of permit total)			\$11.27
TOTAL PERMIT FEE			\$105.19

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00809**

Approval Code: 013589 9/17/2019 12:06 pm

E-mailed To: donwilsue4@aol.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12140 SW WALDEN LN	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Redwood Creek Apt	
Cross Street/directions to job site: Bld # 6	
Tax map/parcel no.: 1S1270000208	
DESCRIPTION OF WORK	
New circuits for washer, dryer and micro. All new devices and LED lighting. New T-stats and heaters	
APPLICANT	
Name: Chris Riehle	
Phone: 5037991639	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C427	CCB lic. no.: 95163
Business Name: QUALITY PLUS FRAMING & ELECTRICAL INC	
Contact:	
Address: 16037 SW BOWMAN LN	
City/State/ZIP: SHERWOOD, OR 97140	
Phone: 5037991639	Fax:
Email: donwilsue4@aol.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	167	\$4.26	\$711.42
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	2	\$91.72	\$183.44
Electrical Permit Fees			
Subtotal			\$976.00
State surcharge (12% of permit total)			\$117.12
TOTAL PERMIT FEE			\$1,093.12

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Milikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00808**

Approval Code: 015970 9/17/2019 12:02 pm

E-mailed To: donwilsue4@aol.com

TYPE OF WORK

- ☐ New Construction ☒ Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- ☐ 1 or 2 family dwelling ☒ Multi-family ☐ Commercial ☐ Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 12173 SW STEAMBOAT DR

City/State/ZIP: BEAVERTON, OR 97008

Suite/bldg./apt.no.:

Project Name: Redwood creek apt

Cross Street/directions to job site: Bld #9

Tax map/parcel no.: 1S1270000208

DESCRIPTION OF WORK

New circuits for washer, dryer, and micro All new devices
New LED lighting all new T-stats and heaters

APPLICANT

Name: Chris Riehle

Phone: 5034770704

Fax:

Email:

CONTRACTOR

Elec lic. no.: C427

CCB lic. no.: 95163

Business Name: QUALITY PLUS FRAMING & ELECTRICAL INC

Contact:

Address: 16037 SW BOWMAN LN

City/State/ZIP: SHERWOOD, OR 97140

Phone: 5037991639

Fax:

Email: donwilsue4@aol.com

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4

Reconnect Only: 1

All Other Services: 2

PLAN REVIEW

Please check all that apply:

- ☐ A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other
- ☐ Fire pumps
- ☐ Emergency systems
- ☐ Addition of a new motor load of 100 HP or more
- ☐ Six or more residential units in one structure
- ☐ Health care facilities
- ☐ Hazardous locations
- ☐ A service or feeder rated at 600 amps or more
- ☐ Buildings more than three stor
- ☐ Marinas and boat yards
- ☐ Floating buildings
- ☐ Commercial-use agricultural buildings
- ☐ Installation of a 150 KVA or larger separately derived sys
- ☐ "A", "E", or "I-2" or "I-3"
- ☐ Recreational Vehicle Parks
- ☐ Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE

Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	167	\$4.26	\$711.42
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	2	\$91.72	\$183.44
Electrical Permit Fees			
Subtotal			\$976.00
State surcharge (12% of permit total)			\$117.12
TOTAL PERMIT FEE			\$1,093.12

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00806**

Approval Code: 02841G 9/17/2019 9:55 am

E-mailed To: info@tritonnw.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 9400 SW BEAVERTON HILLSDALE HWY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 131	
Project Name: 6214 Aspen Tie Cables	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114AC00200	
DESCRIPTION OF WORK	
Run tie cables from old server room and IDF to new server room for security system.	
APPLICANT	
Name: Aaron Van Fleet	
Phone: 5036155800	Fax: 5036285689
Email:	
CONTRACTOR	
Elec lic. no.: 34-648CLE	CCB lic. no.: 154665
Business Name: TRITON COMMUNICATIONS LLC	
Contact:	
Address: PO BOX 1091	
City/State/ZIP: HILLSBORO, OR 97123	
Phone: 5036155800	Fax: 5036285689
Email: info@tritonnw.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Marinas and boat yards	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Health care facilities		
<input type="checkbox"/> Six or more residential units in one structure			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Milikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work**05350-BEL-19-00807**

Approval Code: 990352 9/17/2019 10:08 am

E-mailed To: office@youngelectricco.com

TYPE OF WORK

- ☐ New Construction ☒ Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- ☒ 1 or 2 family dwelling ☐ Multi-family ☐ Commercial ☐ Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 6175 SW CHESTNUT AVE

City/State/ZIP: BEAVERTON, OR 97005

Suite/bldg./apt.no.:

Project Name: Panel Change

Cross Street/directions to job site:

Tax map/parcel no.: 1S123AB04500

DESCRIPTION OF WORK

Panel change

APPLICANT

Name: Young Electric Office

Phone: 9718885081

Fax:

Email:

CONTRACTOR

Elec lic. no.: C353

CCB lic. no.: 178887

Business Name: YOUNG ELECTRIC LLC

Contact:

Address: 9999 SW WILSHIRE ST STE 221

City/State/ZIP: PORTLAND, OR 97225

Phone: 9718885081

Fax: 5036460960

Email: office@youngelectricco.com

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4

Reconnect Only: 1

All Other Services: 2

PLAN REVIEW

Please check all that apply:

- ☐ A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other
- ☐ Fire pumps
- ☐ Emergency systems
- ☐ Addition of a new motor load of 100 HP or more
- ☐ Six or more residential units in one structure
- ☐ Health care facilities
- ☐ Hazardous locations
- ☐ A service or feeder rated at 600 amps or more
- ☐ Buildings more than three stor
- ☐ Marinas and boat yards
- ☐ Floating buildings
- ☐ Commercial-use agricultural buildings
- ☐ Installation of a 150 KVA or larger separately derived sys
- ☐ "A", "E", or "I-2" or "I-3"
- ☐ Recreational Vehicle Parks
- ☐ Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE

Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	2	\$4.26	\$8.52
Electrical Permit Fees			
Subtotal			\$124.35
State surcharge (12% of permit total)			\$14.92
TOTAL PERMIT FEE			\$139.27

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00805**

Approval Code: 604889 9/17/2019 6:38 am

E-mailed To: phelectricllc@gmail.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 11645 SW BEAVERTON HILLSDALE HWY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Nebulous	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115BA02000	
DESCRIPTION OF WORK	
Upgrade panel, add branch circuits	
APPLICANT	
Name: Rodney Loder	
Phone: 5035519611	Fax: 5033759829
Email:	
CONTRACTOR	
Elec lic. no.: C761	CCB lic. no.: 192114
Business Name: PHOTO ELECTRIC LLC	
Contact:	
Address: PO BOX 13657	
City/State/ZIP: SALEM, OR 97309	
Phone: 5035519611	Fax: 5033759829
Email: phelectricllc@gmail.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	18	\$4.26	\$76.68
Electrical Permit Fees			
Subtotal			\$192.51
State surcharge (12% of permit total)			\$23.10
TOTAL PERMIT FEE			\$215.61

Upon review and approval by your local Jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received:	9/17/2019	Permit No:	132019-3902
Date Issued:		By:	BM
		Payment Type:	MC

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 16465 SW Sanderling Ct
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Single branch circuit	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	Amber Krisky
Address:	16465 SW Sanderling Ct
City/State/ZIP:	Beaverton OR 97007
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name:	Same as owner
Address:	16465 SW Sanderling Ct.
City/State/ZIP:	Beaverton OR 97007
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Recreational vehicle parks			
<input type="checkbox"/> Six or more residential units				
<input type="checkbox"/> Health-care facilities				
<input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:	1	91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			\$0.00	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.

Form B70-1002

REV 10/17

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00803**

Approval Code: 39499G 9/16/2019 2:29 pm

E-mailed To: vanguardelectric@gmail.com

TYPE OF WORK

- ☐ New Construction ☒ Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- ☐ 1 or 2 family dwelling ☐ Multi-family ☒ Commercial ☐ Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 15021 SW MILLIKAN WAY

City/State/ZIP: BEAVERTON, OR 97006

Suite/bldg./apt.no.:

Project Name: Millikan Way Sign Light

Cross Street/directions to job site:

Tax map/parcel no.: 1S1080000107

DESCRIPTION OF WORK

One Circuit for sign light

APPLICANT

Name: Christopher Strange

Phone: 503-537-5006

Fax: 503-537-5019

Email:

CONTRACTOR

Elec lic. no.: 36-104C

CCB lic. no.: 164865

Business Name: VANGUARD ELECTRIC INC

Contact:

Address: 3800 MORRIS ST

City/State/ZIP: NEWBERG, OR 97132

Phone: 5035375006

Fax: 5035375019

Email: vanguardelectric@gmail.com

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4

Reconnect Only: 1

All Other Services: 2

PLAN REVIEW**Please check all that apply:**

- ☐ A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other
- ☐ Fire pumps
- ☐ Emergency systems
- ☐ Addition of a new motor load of 100 HP or more
- ☐ Six or more residential units in one structure
- ☐ Health care facilities
- ☐ Hazardous locations
- ☐ A service or feeder rated at 600 amps or more
- ☐ Buildings more than three stor
- ☐ Marinas and boat yards
- ☐ Floating buildings
- ☐ Commercial-use agricultural buildings
- ☐ Installation of a 150 KVA or larger separately derived sys
- ☐ "A", "E", or "I-2" or "I-3"
- ☐ Recreational Vehicle Parks
- ☐ Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE

Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 9-16-19	Permit No: B2019-3892
Date issued: 9-16-19	By: [Signature]
Payment Type: MC	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no: 1905590	Job address:
City/State/ZIP: Beaverton, OR 97006	
Suite/bldg /apt. no.:	Project name:
Cross street/directions to job site: SW Jenkins Rd & Sw 153rd Dr	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Traffic Signal and Street light Work On SE Corner Of Sw Jenkins & Sw 153rd Dr	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Global Electric, Inc.	
Contact name: Dustin O'Rear	
Address: PO Box 162	
City/State/ZIP: North Plains OR 97133	
Phone: (503) 647-5650	Fax: (503) 647-5649
E-mail: dispatch@globalelectricusa.com	
CONTRACTOR	
Business name: Global Electric, Inc.	
Address: PO Box 162	
City/State/ZIP: North Plains OR 97133	
Phone: (503) 647-5650	Fax: (503) 647-5649
E-mail: dispatch@globalelectricusa.com	CCB lic. no.: 156838
Electrical lic. no.: 34-655C	City or metro lic.: 7747
Supervising electrician signature, required: [Signature]	
Print name: Justin Spiering	Date: 9/16/19
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Service or feeder 400amps or more <input type="checkbox"/> Fire pump <input type="checkbox"/> Emergency system <input type="checkbox"/> Addition of new motor load of 100HP or more <input type="checkbox"/> Six or more residential units <input type="checkbox"/> Health-care facilities <input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	115.83	115.83	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit	5	4.26	21.30	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			137.13	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			16.46	
TOTAL PERMIT FEE			\$153.59	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit
Form 870-1002

REV 10/17

**City Of Beaverton**

12725 SW Milikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00804**

Approval Code: 03218Q 9/16/2019 2:42 pm

E-mailed To: spetitt@lumenal.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 8111 SW WEST SLOPE DR	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: PPS Ph 9.5	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S112BB00100	
DESCRIPTION OF WORK	
replace old tech lighting w/ LED lamps	
APPLICANT	
Name: Shane Petitt	
Phone: 4254815001	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C600	CCB lic. no.: 189817
Business Name: LUMENAL LIGHTING LLC	
Contact:	
Address: 21706 66TH AVE W	
City/State/ZIP: MOUNTLAKE TERRACE, WA 98043	
Phone: 4254815001	Fax: 4252754495
Email: CBUSSE@LIGHTDOCTOR.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	14	\$4.26	\$59.64
Electrical Permit Fees			
Subtotal			\$140.78
State surcharge (12% of permit total)			\$16.89
TOTAL PERMIT FEE			\$157.67

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Renewable Electrical Energy Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received: Permit No.: B2019-3847

Date Issued: 8/17/2019 By: [Signature]

Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: Solar PV	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address:
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Residential Rooftop Solar PV 3.41 kW	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
CONTRACTOR	
Business name: Blue Raven Solar, LLC	
Address: 1403 North Research Way	
City/State/ZIP: Orem, UT 84097	
Phone: 385-482-0045	Fax:
E-mail: permitting.department@blueravensolar.com	CCB lic. no.: 210112
Electrical lic. no.: c1214	City or metro lic.: 5869S
Supervising electrician signature, required: <i>Samuel Collier</i>	
Print name: Samuel Collier	Date: 08/20/2019
Authorized signature: <i>Jeff Lee</i>	
Print name: Jeff Lee	Date: 08/20/2019

FEE SCHEDULE			
Number of Inspections per item () Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)	1	81.14	
5.01 to 15 kva (2)		115.83	
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) (OAR 918-309-0070)		81.14	
FEE TOTALS			Recalculate
<< Check box if plan review is required			Subtotal
			0.00
<input type="checkbox"/> Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

Form B70-1005

REV 10/17

\$90.88



Renewable Electrical Energy Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received:	Permit No.: B2019-3843
Date Issued: <i>08/27/2019</i>	By: <i>[Signature]</i>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: Solar PV	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address:
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: Five oaks/triple creek	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Residential Rooftop Solar PV 6.2 kW	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
CONTRACTOR	
Business name: Blue Raven Solar, LLC	
Address: 1403 North Research Way	
City/State/ZIP: Orem, UT 84097	
Phone: 385-482-0045	Fax:
E-mail: permitting.department@blueravensolar.com	CCB lic. no.: 210112
Electrical lic. no.: c1214	City or metro lic.: 5869S
Supervising electrician signature, required: <i>Samuel Collier</i>	
Print name: Samuel Collier	Date: 08/27/2019
Authorized signature: <i>Jeff Lee</i>	
Print name: Jeff Lee	Date: 08/27/2019

FEE SCHEDULE			
Number of inspections per item () Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)	1	81.14	
5.01 to 15 kva (2)		115.83	
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) (OAR 918-309-0070)		81.14	
FEE TOTALS			Recalculate
Subtotal			0.00
<< Check box if plan review is required			
<input type="checkbox"/> Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
Form B70-1005 REV 10/17

\$129.73



Renewable Electrical Energy Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received:	Permit No.: B2019-3890
Date Issued: 9/17/2019	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: Solar PV	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address:
City/State/ZIP: 423 Northwest 174th Terrace, Beaverton, OR 97006	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.: 1N131CD00300	
DESCRIPTION OF WORK	
Residential rooftop solar PV 4.34kw	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
CONTRACTOR	
Business name: Blue Raven Solar, LLC	
Address: 1220 S 630 E #430	
City/State/ZIP: American Fork, UT 84003	
Phone: 385-482-0045	Fax:
E-mail: permitting.department@blueravensolar.com	CCB lic. no.: 210112
Electrical lic. no.: C1214	City or metro lic.: 5869S
Supervising electrician signature, required: Samuel Collier	
Print name: Samuel Collier	Date: 09/09/2019
Authorized signature: [Signature]	
Print name: Jeff Lee	Date: 09/09/2019

FEE SCHEDULE			
Number of inspections per item () Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)	1	81.14	
5.01 to 15 kva (2)		115.83	
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) (OAR 918-309-0070)		81.14	
FEE TOTALS			Recalculate
Subtotal			0.00
<< Check box if plan review is required			
<input type="checkbox"/> Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

Form B70-1005

REV 10/17

\$90.88



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222

BeavertonOregon.gov

OFFICE USE ONLY

Date Received:	9/17/2019	Permit No:	B2019-3897
Date Issued:			
		Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 417 SW 117th
City/State/ZIP:	97225
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Replace existing HVAC unit	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Fox Business Group	
Address: 9050 SW Monterey PL	
City/State/ZIP: Portland OR 97225	
Phone: 971563 7215	Fax:
E-mail:	CCB lic. no.: 188996
Electrical lic. no.: C23	City or metro lic.:
Supervising electrician signature, required:	
Print name: Donald Fox	Date: 9/17/19
Authorized signature:	
Print name: Dan Fox	Date: 9/17/19

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Floating buildings		
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> Commercial-use agricultural buildings		
	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks		
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14	81.14	2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			\$0.00	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.
Form B70-1002 REV 10/17

90.88



Electrical Permit Application

Community Development
PO Box 4755, Beaverton, OR 97076
Phone: (503) 526-2403; Fax: (503) 526-2550
Internet address: www.BeavertonOregon.gov

OFFICE USE ONLY

Date Received:	9/16/09	Permit No.	B2079-3883
Date Issued:		By:	
		Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 6823 SW Sussex St
City/State/ZIP: Beaverton OR 97008	Project name:
Suite/bldg./apt. no.:	Cross street/directions to job site:
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Change the existing Federal Pacific panel with new one.	
PROPERTY OWNER	TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
APPLICANT	CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: ABS Electric LLC	
Address: 752 Division St	
City/State/ZIP: Oregon City, OR 97045	
Phone: 503 888-7076	Fax:
E-mail: Sam_Serac@yahoo.com	CCB lic. no.: 159874
Electrical lic. no.: 26-1218C	City or metro lic.:
Supervising electrician signature, required: [Signature]	
Print name: GEORGE GAKIS	Date:
Authorized signature: [Signature]	
Print name: SAMUEL SERAC	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEES SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single or multi-family dwelling unit (includes attached garage)				
1,000 sq. ft. or less		160.48	0.00	4
Ea. add'l 500 sq. ft. or portion		28.67	0.00	
Limited energy, residential (with above sq. ft.)		38.28	0.00	2
Limited energy, multi-family residential (with above sq. ft.)		75.63	0.00	2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	95.50	0.00	2
201 amps to 400 amps		113.69	0.00	2
401 amps to 600 amps		189.10	0.00	2
601 amps to 1,000 amps		247.31	0.00	2
Over 1,000 amps or volts		589.13	0.00	2
Utility reconnect		75.63	0.00	1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		75.63	0.00	2
201 amps to 400 amps		105.08	0.00	2
401 amps to 600 amps		151.81	0.00	2
601 amps to 1,000 amps		185.76	0.00	2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.51	0.00	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		66.90	0.00	2
Each add'l branch circuit		3.51	0.00	
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		75.63	0.00	2
Pump or irrigation circle		75.63	0.00	2
Sign or outline lighting		75.63	0.00	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		75.63	0.00	2
Each additional inspection over allowable in any of the above				
Per inspection		66.90		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			\$0.00	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.

Form B70-1002

REV 7/14

129.73



City Of Beaverton

12725 SW Milikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00801

Approval Code: 060541 9/13/2019 6:42 am

E-mailed To: kenc@kecelectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14900 SW Barrows #104	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 100	
Project Name: Crumble-PR	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116AA08700	
DESCRIPTION OF WORK	
14900 SW Barrows Rd #104 Beaverton, Or 15-BC	
APPLICANT	
Name: Kenneth Conway	
Phone: 503-439-0904	Fax: 503-640-3838
Email:	
CONTRACTOR	
Elec lic. no.: 34-426C	CCB lic. no.: 99267
Business Name: KEC ELECTRIC INC	
Contact:	
Address: 761 SW BAILY AVE	
City/State/ZIP: HILLSBORO, OR 97123	
Phone: 5034390904	Fax: 5036403838
Email: kenc@kecelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	14	\$4.26	\$59.64
Electrical Permit Fees			
Subtotal			\$140.78
State surcharge (12% of permit total)			\$16.89
TOTAL PERMIT FEE			\$157.67

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Milikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00802**

Approval Code: 52594G 9/13/2019 10:17 am

E-mailed To: margaret@accurateelectricor.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 11790 SW 13TH ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: 20-2237 Carson Strand	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115CD09100	
DESCRIPTION OF WORK	
Change service panel	
APPLICANT	
Name: margaret Sweo	
Phone: 503-631-3507	Fax: 503-631-3544
Email:	
CONTRACTOR	
Elec lic. no.: C637	CCB lic. no.: 191345
Business Name: ACCURATE ELECTRIC OF OREGON INC	
Contact:	
Address: PO BOX 2155	
City/State/ZIP: OREGON CITY, OR 97045	
Phone: 5036313507	Fax: 5036313544
Email: margaret@accurateelectricor.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Electrical Permit Fees			
Subtotal			\$115.83
State surcharge (12% of permit total)			\$13.90
TOTAL PERMIT FEE			\$129.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received:	Permit No. 53019-3870
Date Issued: 9/13/2019	By: [Signature]
Payment Type:	

TYPE OF WORK <input type="checkbox"/> New construction <input checked="" type="checkbox"/> Addition/alteration/replacement <input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION <input checked="" type="checkbox"/> 1- and 2-family dwelling <input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial/Industrial <input type="checkbox"/> Master builder <input type="checkbox"/> Accessory building <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION Job no.: Job address: 5225 SW Laurelwood Ave. City/State/ZIP: Portland, OR 97225 Suite/bldg./apt. no.: Project name: Drake 7 Dees Cross street/directions to job site: Subdivision: Lot no.: Tax map/parcel no.:	
DESCRIPTION OF WORK Circuit for new water feature pump <input type="checkbox"/> PROPERTY OWNER <input type="checkbox"/> TENANT Name: Address: City/State/ZIP: Phone: Fax: E-mail: Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange. Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT <input type="checkbox"/> CONTACT PERSON Business name: Garner Electric Contact name: Andrea Phillips Address: 2920 SE Brookwood Ave. Ste #A City/State/ZIP: Hillsboro, OR 97123 Phone: (503) 648-4552 Fax: (503) 642-7925 E-mail: andreap@garnerelectric.com	
CONTRACTOR Business name: Garner Electric Address: 2920 SE Brookwood Ave. Ste #A City/State/ZIP: Hillsboro, OR 97123 Phone: (503) 648-4552 Fax: (503) 642-7925 E-mail: andreap@garnerelectric.com CCB lic. no.: 121159 Electrical lic. no.: 34-305C City or metro lic.: 4410 Supervising electrician signature, required: [Signature] Print name: Charles Garner Date: 09/10/19 Authorized signature: Andrea Phillips Print name: Andrea Phillips Date: 09/10/19	

PLAN REVIEW Please check all that apply: <input type="checkbox"/> Service or feeder 400 amps or more <input type="checkbox"/> Fire pump <input type="checkbox"/> Emergency system <input type="checkbox"/> Addition of new motor load of 100HP or more <input type="checkbox"/> Six or more residential units <input type="checkbox"/> Health-care facilities <input type="checkbox"/> Hazardous locations <input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marina and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit (includes attached garage)			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14	81.14
Each add'l branch circuit		4.26	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting		91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
Each additional inspection over allowable in any of the above:			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			81.14
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			9.74
TOTAL PERMIT FEE			\$90.88

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.

Form B70-1002

REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222 V/TDD

BeavertonOregon.gov

OFFICE USE ONLY

Date Received:

Permit No.:

Date Issued:

By:

Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: 190732	Job address: 8093 SW Circus Dr
City/State/ZIP: Beaverton OR 97008	
Suite/bldg./apt. no.:	Project name: NW Sport Photo
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Install 200 amp Panel & 30 Amp twist lock	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: North West Sports Photography	
Address: 8093 SW Circus Dr	
City/State/ZIP: Beaverton OR 97008	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: [Signature]	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Steele Electric	
Address: 716 Rose Drive	
City/State/ZIP: Forest Grove, OR 97116	
Phone: 503-268-1311	Fax: 503-372-6448
E-mail: service@nwsteele.com	CCB lic. no.: 186140
Electrical lic. no.: 6489	City or metro lic.: 10034
Supervising electrician signature, required: [Signature]	
Print name: Dan Steele	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		185.37		4
Ea. add'l 500 sq. ft. or portion		33.11		
Limited energy, residential (with above sq. ft.)		44.21		2
Limited energy, multi-family residential (with above sq. ft.)		87.35		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	110.31		2
201 amps to 400 amps		131.32		2
401 amps to 600 amps		218.42		2
601 amps to 1,000 amps		285.65		2
Over 1,000 amps or volts		657.35		2
Utility reconnect		87.35		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		87.35		2
201 amps to 400 amps		121.34		2
401 amps to 600 amps		175.34		2
601 amps to 1,000 amps		214.56		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit	5	4.06		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		77.28		2
Each add'l branch circuit		4.06		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		87.35		2
Pump or irrigation circle		87.35		2
Sign or outline lighting		87.35		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		87.35		2
Each additional inspection over allowable in any of the above				
Per inspection		77.28		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				
TOTAL PERMIT FEE 153.59				

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* Number of inspections allowed per permit.

Form B70-1002

REV 10/16

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00799**

Approval Code: 037724 9/12/2019 9:47 am

E-mailed To: DENNISW@STONERGROUP.COM

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 10029 SW NIMBUS AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.: 230	
Project Name: PERFORMANCE WELLNESS	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127DC00600	
DESCRIPTION OF WORK	
ADD RECEPTACLES & INSTA-HOT IN OFFICE SPACE, SUITE 230	
APPLICANT	
Name: SHAWN WINTERS	
Phone: 5038060767	Fax: 5036594968
Email:	
CONTRACTOR	
Elec lic. no.: 26-122C	CCB lic. no.: 44823
Business Name: STONER ELECTRIC INC	
Contact:	
Address: 1904 SE OCHOCO	
City/State/ZIP: MILWAUKIE, OR 97222	
Phone: 5034626500	Fax: 5036594968
Email: DENNISW@STONERGROUP.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	2	\$4.26	\$8.52
Electrical Permit Fees			
Subtotal			\$89.66
State surcharge (12% of permit total)			\$10.76
TOTAL PERMIT FEE			\$100.42

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Milikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00798**

Approval Code: 113310 9/12/2019 9:33 am

E-mailed To: jfoti@advcomserv.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 9600 SW NIMBUS AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Care Payment	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127DD00600	
DESCRIPTION OF WORK	
(97) Cat 6 Plus (550 MHZ) Plenum Cable Runs: Includes Cat 6 Plus Plenum Cable, Cat 6 Inserts, Faceplates & Labor *** Includes removing old cabling the will not be used	
APPLICANT	
Name: Joseph Foti	
Phone: 503-598-7082	Fax: 503-598-7320
Email:	
CONTRACTOR	
Elec lic. no.: CLE139	CCB lic. no.: 179445
Business Name: ADVANCED COMMUNICATIONS SERVICES INC	
Contact:	
Address: PO BOX 231196	
City/State/ZIP: PORTLAND, OR 97281	
Phone: 5035987082	Fax: 5035987320
Email: JFOTI@ADVCOMSERV.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00800**

Approval Code: 212144 9/12/2019 10:44 am

E-mailed To: hillaryp@cepdx.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 4050 SW 139TH WAY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: 50A Buck Boost	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116BA00600	
DESCRIPTION OF WORK	
Install buck boost xfmr on 50a outlet ckt	
APPLICANT	
Name: Capitol Electric	
Phone: 5032559488	Fax: 5032577121
Email:	
CONTRACTOR	
Elec lic. no.: 26-496C	CCB lic. no.: 48748
Business Name: CAPITOL ELECTRIC CO INC	
Contact:	
Address: 11401 NE MARX ST	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: DARRELL@CEPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> Floating buildings
		<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Commercial-use agricultural buildings
		<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00797**

Approval Code: 005083 9/12/2019 8:50 am

E-mailed To: crogers@diversifiedus.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15950 SW MILLIKAN WAY	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: PD7327 The Portland Clinic	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S108CD00700	
DESCRIPTION OF WORK	
AV install, display and video conferencing system	
APPLICANT	
Name: CHRISTOPHER ROGERS	
Phone: 5036015543	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: CLE527	CCB lic. no.: 213697
Business Name: ONE DIVERSIFIED LLC	
Contact:	
Address: 2975 NORTHWOODS PARKWAY	
City/State/ZIP: NORCROSS, GA 30071	
Phone: 7704471001	Fax:
Email:	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Limited Energy			
Stand-alone limited energy, commercial	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222

BeavertonOregon.gov

OFFICE USE ONLY

Date Received: **RECEIVED**

Permit No.: B2019-1255

Date Issued: **9-13-19**
03/28/2019By: **ML**Payment Type: **Check**CITY OF BEAVERTON
BUILDING DIVISION

PLAN REVIEW

Please check all that apply:

- | | |
|--|--|
| <input type="checkbox"/> Service or feeder 400amps or more | <input type="checkbox"/> Service or feeder over 600 amps |
| <input type="checkbox"/> Fire pump | <input type="checkbox"/> Building over three stories |
| <input type="checkbox"/> Emergency system | <input type="checkbox"/> Marinas and boatyards |
| <input type="checkbox"/> Addition of new motor load of 100HP or more | <input type="checkbox"/> Floating buildings |
| <input type="checkbox"/> Six or more residential units | <input type="checkbox"/> Commercial-use agricultural buildings |
| <input type="checkbox"/> Health-care facilities | <input type="checkbox"/> Installation of 150 KVA or larger separately derived system |
| <input type="checkbox"/> Hazardous locations | <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy |
| | <input type="checkbox"/> Recreational vehicle parks |

FEE SCHEDULE

Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less	1	194.64		4
Ea. add'l 500 sq. ft. or portion	5	34.77		
Limited energy, residential (with above sq. ft.)	1	46.42	46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	115.83	115.83	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			162.25	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				19.47
TOTAL PERMIT FEE			\$181.72	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.

Form B70-1002

REV 10/17

464.70

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 17314 SW Dotterel Lane
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: 175TH AVE AND SW BARROWS RD	
Subdivision: SOUTH COOPER MT	Lot no.: 168
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW CONSTRUCTION	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: SK HOFF CONSTRUCTION	
Address: 735 SW 158TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Phone: (503) 641-7342	Fax: (503) 641-7661
E-mail: sguerrero@arborhomes.com	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: 01/29/19	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: SK HOFF CONSTRUCTION	
Contact name: SANDRO GUERRERO	
Address: 735 SW 158TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Phone: (503) 319-6963	Fax: (503) 641-7661
E-mail: sguerrero@arborhomes.com	
CONTRACTOR	
Business name: Garner Electric	
Address: 2920 SE BROOKWOOD AVE STE A	
City/State/ZIP: HILLSBORO, OR 97123	
Phone: (503) 648-4552	Fax:
E-mail: melgarner@garnerelectric.com	CCB lic. no.: 121159
Electrical lic. no.: 34-305C	City or metro lic.: 4410
Supervising electrician signature, required: _____	
Print name: Chuck Garner	Date: 01/29/19
Authorized signature: _____	
Print name: Melissa Stock	Date: 01/29/19



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222 V/TDD
BeavertonOregon.gov

OFFICE USE ONLY

Date Received:	10-25-18	Permit No.:	B2018-4963
Date Issued:	9/13/2019		
		Payment Type:	

TYPE OF WORK

- ☐ New construction ☐ Addition/alteration/replacement
☐ Other:

CATEGORY OF CONSTRUCTION

- ☐ 1- and 2-family dwelling ☐ Commercial/industrial ☐ Accessory building
☐ Multi-family ☐ Master builder ☐ Other:

JOB SITE INFORMATION AND LOCATION

Job no.: Job address: 16103 SW Wen Ln

City/State/ZIP: BEAVERTON OR

Suite/bldg./apt. no.: Project name: RUSSELL

Cross street/directions to job site:

Subdivision: WESTMONT Lot no.: 58

Tax map/parcel no.:

DESCRIPTION OF WORK

NEW SINGLE FAMILY RESIDENCE

☐ PROPERTY OWNER

☐ TENANT

Name: DR HORTON INC

Address: 4380 SW MACADAM AVE

City/State/ZIP: PORTLAND OR 97239

Phone: 5032224151 Fax:

E-mail: PLANCHECK@DRHORTON.COM

Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.

Owner signature: Date:

☐ APPLICANT

☐ CONTACT PERSON

Business name: SAME AS ABOVE

Contact name: AMANDA LOVERIDGE

Address:

City/State/ZIP:

Phone: Fax:

E-mail:

CONTRACTOR

Business name: Power Line Electric, Inc

Address: 8403 SE Sherrett St

City/State/ZIP: Portland, OR 97266

Phone: (971) 645-3807 Fax:

E-mail: PowerLineElectric@yahoo.com CCB lic. no.: 205976

Electrical lic. no.: C1099 City or metro lic.: 11838

Supervising electrician signature, required: Alan Brown

Print name: Alan Brown Date:

Authorized signature:

Print name: Date:

PLAN REVIEW

Please check all that apply:

- ☐ Service or feeder 400amps or more
☐ Fire pump
☐ Emergency system
☐ Addition of new motor load of 100HP or more
☐ Six or more residential units
☐ Health-care facilities
☐ Hazardous locations
☐ Service or feeder over 600amps
☐ Building over three stories
☐ Marinas and boatyards
☐ Floating buildings
☐ Commercial-use agricultural buildings
☐ Installation of 150 KVA or larger separately derived system
☐ "A," "E," "I-2," "I-3" occupancy
☐ Recreational vehicle parks

FEE SCHEDULE

Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit Includes attached garage			
1,000 sq. ft. or less	1	168.52	4
Ea. add'l 500 sq. ft. or portion	6	30.10	
Limited energy, residential (with above sq. ft.)	1	40.19	2
Limited energy, multi-family residential (with above sq. ft.)		79.41	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less	1	100.28	2
201 amps to 400 amps		119.38	2
401 amps to 600 amps		198.56	2
601 amps to 1,000 amps		259.68	2
Over 1,000 amps or volts		597.59	2
Utility reconnect		79.41	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		79.41	2
201 amps to 400 amps		110.31	2
401 amps to 600 amps		159.40	2
601 amps to 1,000 amps		195.05	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.69	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		70.25	2
Each add'l branch circuit		3.69	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		79.41	2
Pump or irrigation circle		79.41	2
Sign or outline lighting		79.41	2
Signal circuit(s) or limited-energy panel, alteration, or extension Describe:		79.41	2
Each additional inspection over allowable in any of the above			
Per inspection		70.25	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222 V/TDD

BeavertonOregon.gov

RECEIVED

OFFICE USE ONLY

Date Received: NOV 5 2018	Permit No.: B2012-5191
Date Issued: 9/13/2019	By: [Signature]
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 16120 SW Wren Ln
City/State/ZIP: BEAVERTON OR	
Suite/bldg./apt. no.:	Project name: RUSSELL
Cross street/directions to job site:	
Subdivision: WESTMONT	Lot no.: 29
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SINGLE FAMILY RESIDENCE	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR HORTON INC	
Address: 4380 SW MACADAM AVE	
City/State/ZIP: PORTLAND OR 97239	
Phone: 5032224151	Fax:
E-mail: PLANCHECK@DRHORTON.COM	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: SAME AS ABOVE	
Contact name: AMANDA LOVERIDGE	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Power Line Electric, Inc	
Address: 8403 SE Sherrett St	
City/State/ZIP: Portland, OR 97266	
Phone: (971) 645-3807	Fax:
E-mail: PowerLineElectric@yahoo.com	CCB lic. no.: 205976
Electrical lic. no.: C1099	City or metro lic.: 11838
Supervising electrician signature, required: Alan Brown	
Print name: Alan Brown	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings	
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks		
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit includes attached garage			
1,000 sq. ft. or less	1	168.52	4
Ea. add'l 500 sq. ft. or portion (with above sq. ft.)	6	30.10	
Limited energy, residential (with above sq. ft.)	1	40.19	2
Limited energy, multi-family residential (with above sq. ft.)		79.41	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less	1	100.28	2
201 amps to 400 amps		119.38	2
401 amps to 600 amps		198.56	2
601 amps to 1,000 amps		259.68	2
Over 1,000 amps or volts		597.59	2
Utility reconnect		79.41	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		79.41	2
201 amps to 400 amps		110.31	2
401 amps to 600 amps		159.40	2
601 amps to 1,000 amps		195.05	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.69	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		70.25	2
Each add'l branch circuit		3.69	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		79.41	2
Pump or irrigation circle		79.41	2
Sign or outline lighting		79.41	2
Signal circuit(s) or limited-energy panel, alteration, or extension Describe:		79.41	2
Each additional inspection over allowable in any of the above			
Per inspection		70.25	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit



Renewable Electrical Energy Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received:	Permit No.: B2019-3852
Date Issued: 9/12/2019	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 11350 SW Cardinal Terr.
City/State/ZIP: Beaverton OR 97008	
Suite/bldg/apt. no.:	Project name: ES - Mejia
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
12.94kw prescriptive solar install	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Oscar Mejia	
Address: 11350 SW Cardinal Terr.	
City/State/ZIP: Beaverton OR 97008	
Phone: 503.442.7357	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
CONTRACTOR	
Business name: Clackamas Electric	
Address: PO Box 51	
City/State/ZIP: Beaverton OR 97004	
Phone: 503.632.2420	Fax:
E-mail: office@clackamaselectric.com	CCB lic. no.: 161923
Electrical lic. no.: 3-6066	City or metro lic.:
Supervising electrician signature, required: [Signature]	
Print name: Geo H Johnston	Date:
Authorized signature: [Signature]	
Print name: LOLITA GALLAMORE	Date: 9/10/19

FEE SCHEDULE			
Number of inspections per item () Renewable energy installation per system total	No. of items	Cost Each	Total
5 kva or less (2)		81.14	
5.01 to 15 kva (2)	1	115.83	
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) (OAR 918-309-0070)		81.14	
FEE TOTALS			
Subtotal			0.00
Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

Form B70-1005

REV 10/17

\$129.73

**City Of Beaverton**

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00796**

Approval Code: 01230G 9/11/2019 3:47 pm

E-mailed To: michelle@gocreativelighting.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 4970 SW GRIFFITH DR	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 100	
Project Name: First Response/ I Watch Communications	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115BD04501	
DESCRIPTION OF WORK	
LED - Addition/Alteration/Replacement	
APPLICANT	
Name: Michelle Whiting	
Phone: 5038200222	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1277	CCB lic. no.: 202492
Business Name: CREATIVE LIGHTING SOLUTIONS INC	
Contact:	
Address: 17700 SW UPPER BOONES FERRY RD #140	
City/State/ZIP: PORTLAND, OR 97224	
Phone: 5038200222	Fax:
Email: MBERNARDS@CLSNW.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of Inspections Included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Milikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00794**

Approval Code: 00439G 9/11/2019 10:52 am

E-mailed To: office@ericolsonelectricinc.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 8565 SW BEAVERTON HILLSDALE HWY	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: 19-2264	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114AD00100	
DESCRIPTION OF WORK	
Moving existing 100 amp feeder, reconnecting (2) units, & a service plug	
APPLICANT	
Name: eric olson	
Phone: 3602581849	Fax: 3602581859
Email:	
CONTRACTOR	
Elec lic. no.: 37-1053C	CCB lic. no.: 179408
Business Name: ERIC OLSON ELECTRIC INC	
Contact:	
Address: 10013 NE HAZEL DELL AVE PMB#432	
City/State/ZIP: VANCOUVER, WA 98685	
Phone: 3602581849	Fax: 3602581859
Email: office@ericolsonelectricinc.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$128.61
State surcharge (12% of permit total)			\$15.43
TOTAL PERMIT FEE			\$144.04

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit

**City Of Beaverton**

12725 SW Milikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work**05350-BEL-19-00795**

Approval Code: 037083 9/11/2019 2:37 pm

E-mailed To: cacey.chapman@ecpowerslife.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14600 SW MURRAY SCHOLLS DR	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Volta WG #6370	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132DA00800	
DESCRIPTION OF WORK	
Install (1) feeder and 125a panel and (2) EV charging stations	
APPLICANT	
Name: Cacey Chapman	
Phone: 5032285737	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-45C	CCB lic. no.: 49737
Business Name: EC COMPANY	
Contact:	
Address: PO BOX 10286	
City/State/ZIP: PORTLAND, OR 97296	
Phone: 5032243511	Fax: 5032953012
Email: clndyb@e-c-co.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	4	\$4.26	\$17.04
Electrical Permit Fees			
Subtotal			\$132.87
State surcharge (12% of permit total)			\$15.94
TOTAL PERMIT FEE			\$148.81

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

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The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 9/12/2019	Permit No: 153019-3854
Date Issued: 9/13/2019	BY: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction <input checked="" type="checkbox"/> Addition/alteration/replacement <input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling <input type="checkbox"/> Multi-family	<input checked="" type="checkbox"/> Commercial/Industrial <input type="checkbox"/> Master builder <input type="checkbox"/> Accessory building <input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15220 NW Greenbrier Pkwy
City/State/ZIP: Beaverton, OR 97006	
Suite/bldg./apt. no.: 245	Project name: Hawkridge Systems
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Structured Cabling (Phone/Data)	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: Hawkridge Systems	
Address: 15220 NW Greenbrier Pkwy Suite 245	
City/State/ZIP: Beaverton, OR 97006	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Point Monitor Corp.	
Contact name: Brooke Williams	
Address: 5863 Lakeview Blvd #100	
City/State/ZIP: Lake Oswego, OR 97035	
Phone: (503) 627-0100	Fax:
E-mail: bwilliams@pointmonitor.com	
CONTRACTOR	
Business name: Point Monitor Corp.	
Address: 5863 Lakeview Blvd #100	
City/State/ZIP: Lake Oswego, OR 97035	
Phone: (503) 627-0100	Fax:
E-mail: bwilliams@pointmonitor.com	CCB lic. no.: 135901
Electrical lic. no.: 34-508CLE	City or metro lic.:
Supervising electrician signature, required: [Signature]	
Print name: Ben Breit	Date: 09/12/19
Authorized signature: [Signature]	
Print name: Ben Breit	Date: 09/12/19

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:	1	91.72	91.72	2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			91.72	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			11.01	
TOTAL PERMIT FEE			\$102.73	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
* Number of inspections allowed per permit.



Electrical Permit Application
City of Beaverton Community Development
PO Box 4788, Beaverton, OR 97078
Phone: (503) 626-2403; Fax: (503) 626-2650
Internet address: www.BeavertonOregon.gov

RECEIVED

0/11/2019
OFFICE USE ONLY
Date Received: **9-12-19** Permit No.: **B2019-3468**
Date Issued: **9-12-19** By: **MW**
BUILDING DIVISION Payment Type: **Check**

TYPE OF WORK
☒ New construction ☐ Addition/alteration/replacement
☐ Other:

CATEGORY OF CONSTRUCTION
☒ 1- and 2-family dwelling ☐ Commercial/Industrial ☐ Accessory building
☐ Multi-family ☐ Master builder ☐ Other:

JOB SITE INFORMATION AND LOCATION
Job no.: Job address: **11711 SW SOPHIA COURT**
City/State/ZIP: **BEAVERTON, OR 97225**
Subdivision: **CAMERON PLACE** Lot no.: **5**
Tax map/parcel no.:
Project name: **CAMERON PLACE**
Cross street/directions to job site: **WALKER RD to Lynfield**

DESCRIPTION OF WORK
NEW SINGLE FAMILY

☒ **PROPERTY OWNER** ☐ **TENANT**
Name: **Mission Homes NW, LLO**
Address: **PO Box 1689**
City/State/ZIP: **Lake Oswego, OR 97035**
Phone: (503) 381-3753 Fax: (503) 214-8524
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.
Owner signature: _____ Date: _____

☒ **APPLICANT** ☐ **CONTACT PERSON**
Business name: **Mission Homes NW, LLO**
Contact name: **Josh Kelso**
Address: **PO Box 1689**
City/State/ZIP: **Lake Oswego, OR 97035**
Phone: (503) 381-3753 Fax: (503) 214-8524
E-mail: **joshkelso3@gmail.com**

CONTRACTOR
Business name: **Connections Electric Inc**
Address: **PO 7136**
City/State/ZIP: **Salem, OR 97303**
Phone: (503) 390-7914 Fax: (503) 488-8883
E-mail: **connections.electric@hotmail.com** OCB lic. no.: **65444**
Electrical lic. no.: **24-248C** City or metro lic.: **6485**
Supervising electrician signature, required: _____
Print name: **Marvin Bergavin** Date: _____
Authorized signature: _____
Print name: **JOSH KELSO** Date: **8-13-19**

PLAN REVIEW
Please check all that apply:
☐ Service or feeder 400 amps or more
☐ Fire pump
☐ Emergency system
☐ Addition of new motor load of 100HP or more
☐ Six or more residential units
☐ Health-care facilities
☐ Hazardous locations
☐ Service or feeder over 600 amps
☐ Building over three stories
☐ Marinas and boatyards
☐ Floating buildings
☐ Commercial-use agricultural buildings
☐ Installation of 150 KVA or larger separately derived system
☐ "A" "E" "I-2" "I-3" occupancy
☐ Recreational vehicle parks

FEE SCHEDULE

Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less	1	144.20		4
Ea. add'l 500 sq. ft. or portion	86	25.75		
Limited energy, residential (with above sq. ft.)	1	34.40		2
Limited energy, multi-family residential (with above sq. ft.)		67.95		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	55.80		2
201 amps to 400 amps		102.15		2
401 amps to 600 amps		169.90		2
601 amps to 1,000 amps		222.20		2
Over 1,000 amps or volts		611.05		2
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		87.95		2
201 amps to 400 amps		94.40		2
401 amps to 600 amps		136.40		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.15		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		50.10		2
Each add'l branch circuit		3.15		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		67.95		2
Utility reconnect		67.95		1
Pump or irrigation circle		47.95		2
Sign or outline lighting		67.95		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		67.95		2
Each additional inspection over allowable in any of the above				
Per inspection		60.10		
Investigation fee				
Other:				
ELECTRICAL PERMIT FEES				
Subtotal			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			0.00	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
* Number of inspections allowed per permit.



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

RECEIVED OFFICE USE ONLY	
Date Received: 8/29/2019	Permit No. B2019-3677
Date Issued:	By: <i>[Signature]</i>
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: 19227	Job address: 9800 SW Nimbus
City/State/ZIP: Beaverton OR 97006	
Suite/bldg./apt. no.: Nimbus	Project name: 9800 SW Nimbus
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Low voltage HVAC controls to accommodate T.I. Related to B2019-1788	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: (Rep) Erickson Realty Ltd.	
Address: 4900 SW Griffith Drive Ste 135	
City/State/ZIP: Beaverton OR 97005	
Phone: 503-703-9401	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Hunter-Davisson, Inc.	
Contact name: Ryan Poter	
Address: 1800 SE Pershing Street	
City/State/ZIP: Portland OR 97202	
Phone: 503-542-3628	Fax:
E-mail: rpoter@hunterdavisson.com	
CONTRACTOR	
Business name: Same As Above	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.: 1612
Electrical lic. no.: 26-682 CKE	City or metro lic.:
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: Jim Davisson	Date: 8-27-19
Authorized signature: <i>[Signature]</i>	
Print name: Ryan Poter	Date: 8-27-19

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks	
<input type="checkbox"/> Addition of new motor load of 100HP or more			
<input type="checkbox"/> Six or more residential units			
<input type="checkbox"/> Health-care facilities			
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit Includes attached garage			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14	2
Each add'l branch circuit		4.26	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting		91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:	1	91.72	2
Each additional inspection over allowable in any of the above			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
* Number of inspections allowed per permit.
Form B70-1002 REV 10/17